California Department of Corrections and Rehabilitation

Office of Audits and Compliance



Operational Peer Review

Pelican Bay State Prison

April 14 – April 25, 2008

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OFFICE OF AUDITS AND COMPLIANCE

PELICAN BAY STATE PRISON

EXECUTIVE SUMMARY

The Office of Audits and Compliance, in conjunction with various teams, conducted an
audit of Administrative Segregation (Ad Seg) and Due Process, Business Services,
Information Security, Inmate Education Programs, Inmate Appeals,
Ad Seg Bed Utilization, and Radio Communication,
Case Record, at Pelican Bay State Prison (PBSP).
The audit was preformed during the period of April 24 through April 25, 2008. The
purpose of the audit was to determine PBSP's compliance with State, federal, and
departmental rules, regulations, policies, and procedures.

Preliminary audit reports were prepared for each of the audited areas. This executive summary identifies the significant issues identified in each of the preliminary reports. For more information on the areas of interest, please see the detail preliminary report. The Office of Audits and Compliance requested that PBSP provide a corrective action plan 30-days from the date of the preliminary report.

A summary of the significant issues is as follows:

Ad Seg and Due Process

Areas of concern were found in the following areas:

- Exercise. In administrative segregation unit (ASU), the exercise yard is being offered at least three periods per week for a minimum of ten hours of outdoor exercise per week. However, in A1 and A2, inmates are only being offered seven to ten hours of outdoor exercise.
- Yard Group Designation on the Inmate Segregation Profile (CDC 114-A1). The review revealed that in a random sample of 29 CDC 114-A1s reviewed, 23 (79 percent) documented the inmate's current yard group designation. The 6 remaining CDC 114-A1s did not contain this information.
- CDC 114-A1 90-Day Update. The review revealed that in a random sample of 29 CDC 114-A1s reviewed, 2 were not ratable as the inmate had not been on Ad Seg status for a period of time long enough to require an update. Of the 27 ratable records, 22 (81 percent) were updated as appropriate. The 5 remaining CDC 114-A1s were not updated as required.
- Quarterly Fire Drills. Of the 36 required quarterly fire drills, documentation was provided to indicate that 11 (31 percent) had been conducted.

- Confidential Material. Of the 30 records reviewed, 28 were not ratable, as the reason(s) for Ad Seg placement was not based on confidential information. Of the 2 ratable records, 1 (50 percent), documented that the Confidential Information Disclosure (CDC 1030) was appropriate and issued within the required time frame. The 1 remaining record did not contain a CDC 1030.
- Administrative Review. Of the 30 records reviewed, 25 (83 percent) contained documentation of a placement review by a Captain within the first working day following the inmate's placement in Ad Seg. Of the 5 remaining records, 4 documented a late review by a Captain (1 to 3 days late) and 1 record did not document that an administrative review was conducted on a reissued Administrative Segregation Unit Placement Notice (CDC 114-D).
- **Determination of Staff Assistance.** Of the 30 records reviewed, 26 (87 percent) contained documentation of a determination for the assignment of a Staff Assistant/Investigative Employee (IE). Of the 4 remaining records, 3 left the IE section blank and 1 record did not document that an administrative review was conducted on a reissued CDC 114-D.
- Need for Witnesses on the CDC 114-D. Of the 30 records reviewed, 23 (77 percent) contained documentation regarding the need for witnesses. Of the 7 remaining records, 6 left the witness section entirely blank and 1 record did not document that an administrative review was conducted on a reissued CDC 114-D.
- Inmate Waiver. Of the 30 records reviewed, 22 (73 percent) contained documentation that the inmate made a determination regarding the 72-hour time limit or had refused to sign the waiver section. Of the 8 remaining records, 5 documented the inmate had waived the 72-hour time limit absent the inmate's signature, 2 records left this section blank, and 1 record did not document that an administrative review was conducted on a reissued CDC 114-D.
- Witnesses on the Classification Chrono (CDC 128-G). Of the 30 records reviewed, 22 were not ratable, as the need for witnesses was properly documented on the CDC 114-D. Of the 8 ratable records, 3 (38 percent) contained documentation regarding the need for witnesses on the CDC 128-G when the information was not otherwise properly documented on the CDC 114-D. The 5 remaining records did not contain this information.
- Post Order—Job Site. The review revealed that a current copy of the post order is provided at the job site for 37 (49 percent) of the 75 Ad Seg posts. The 38 remaining post orders were outdated.

Business Services

Personnel:

- PBSP is hiring over the budgeted authority. This violates State Administrative Manual, Section 8531. For example, there are ten positions paid out of the 918 blanket when there are no vacant positions or anticipated vacancies in the future according to the vacancy report. The positions are two Correctional Counselors II (Specialist), a Correctional Captain, an Electronic Technician, two Painters II (CF), one Staff Services Analyst (General), one Library Technician, one Office Assistant (General) (who is on a Training and Development assignment), and a Supervising Correctional Cook.
- There are 30 salary advances outstanding over 90 days. No action was taken or resolution provided on 28 salary advances totaling \$36,220.
- There are 98 Accounts Receivables (AR) outstanding over 90 days. No action was taken or resolution provided on 49 ARs totaling \$15,735.
- Bilingual Pay Request Forms (Std. 897) are not always complete. This is noted on four of the five Std. 897s reviewed. Additionally, proof of passing the bilingual examination, duty statement and the organizational charts were not attached to the Std. 897s as required by the Personnel Services Manual, Sections 230.6 and 230.7, and the California State Civil Service Pay Scale, Section 14.
- Of the 224 CDC 647s processed in 2007, approximately 37 were reviewed for completeness. The following was noted: 1) limited term appointments did not have justifications attached, 2) extensions were not always adequately justified, 3) industrial appointments did not have the Essential Functions Questionnaire (Std. 910) completed, 4) no justifications were prepared for placing employees in a blanket, and 5) six appointments were made to classifications that required the Office of Personnel Services approval.
- There are deficiencies related to out-of-class assignments. For example, 1) there was no Department of Personnel Administration approval for an out-of-class assignment over 120 days, 2) many assignments are missing the bargain unit identification, 3) organizational charts are not signed, and 4) recruitment was not performed when extending an out-of-class assignment.

Plant Operations:

The Plant Operations Maintenance Report does not accurately reflect plant operations activities as required by Department Operations Manual (DOM), Section 11010.12.4.4. For example, total hours are understated by 3,000 hours during for the period of October 2007 through March 2008. The Plant Operation Maintenance Report is not reviewed by the Warden. Additionally, there are 4,500 hours of overtime at a cost of \$184,366 that is not captured.

Information Security

The following represent partial compliance.

Staff Computing Environment:

- Use Agreements are not on file.
- Staff computer processing units (CPU) are not labeled "No Inmate Access."
- Anti virus updates are not current.
- Security patches are not current.

Inmate Computing Environment:

- CPUs are not labeled as inmate computers.
- Inmate monitors are not visible to the supervisor.

Inmate Education Programs

Education Administration: The Operational Procedure is old. It was last revised in July 2005. There is no Education/Work program as required by the Alternative Education Delivery Model Operational Procedure.

Academic Education: Not all teachers are issuing certificates of achievements and completions to students who have earned them. The teachers did not know that they have the authority to give elective credits. Most did not know that Office of Correctional Education have a policy and procedure in place to issue High School Diplomas.

Many of the teachers are not using the Test of Basic Adult Education (TBAE) locator test. The TBAE test coordinator has a master inventory of test books and a check out system for testing books; however, the answer sheets are not inventoried and monitored. The answer sheets need to be added to the master inventory and their count needs to be also tracked on the check out and in system.

Inmate Appeals

Training: There is no evidence that the Appeals Coordinator participated in Appeals Process Training.





Administrative Segregation Bed Utilization

This review is presented in four separate case groups (i.e. Disciplinary Process, Incident Report Processing, Safety Concerns Investigation, and Prison Gang Investigation).

Disciplinary Process:

- 1) <u>Hearing to Facility Captain Review:</u> Time from the date of the Rules Violation Report (RVR) hearing to the date the RVR was audited by the Facility Captain ranged from 1 day to 25 days. Average time was 6.5 days. The Department has no regulatory time constraints; however, the expectation is this time will be within 5 working days.
- 2) Facility Captain to Chief Disciplinary Officer Review: Time from the date the RVR was audited by the Facility Captain to the date the RVR was audited by the Chief Disciplinary Officer ranged from 1 day to 34 days. Average time was 7 days. The Department has no regulatory time constraints; however, the expectation is this time will be within 3 working days.
- 3) Chief Disciplinary Officer to Institution Classification Committee (ICC) review: Time from date the Chief Disciplinary Officer audited the RVR to the case being reviewed by the ICC for the RVR ranged from 6 days to 79 days. Average time was 23 days. The expectation is the inmate will appear before ICC within 14 days. This will allow staff a two-week ICC rotation period.
 - 4) Incident Report Processing: Once an incident has occurred, the Incident Report must be prepared and completed. This timeline measures the process within the Institution as it completes the report, forwards it to its Investigative Services Unit (ISU) and the subsequent response time from the office of the District Attorney (DA) or the ISU screen-out based on local agreement with the DA.

Incident Reporting Processing:

- 1) <u>Incident Date to ISU Receipt of Incident Report:</u> Date from incident occurrence to the date ISU received the Incident Report is within 24 hours. The expectation is the complete package will be presented to ISU within 7 calendar days.
- 2) <u>ISU Receipt of Incident Report to Referral to DA/ISU Screen out:</u> Date from ISU's receipt of Incident Report to referral to DA or ISU screen out ranged from 1 day to 176 days. Average time was 25 days. The expectation is the time should not exceed 5 working days.
- 3) <u>DA Referral to Resolution:</u> Date from DA referral to either rejection or acceptance of the case ranged from 2 days to 97 days. This is one area that the Institution has no definitive control over, however, it is suggested that the Institution work closely with the DA's office to track the decision making process to resolution of either acceptance of the case for prosecution or rejection of the case for prosecution.

Safety Concern Investigations:

- 1) <u>Investigation initiation to Completion:</u> Time from the date of referral to staff for investigation to the date the investigation was concluded ranged from 15 days to 76 days. Average time was 32 days. The expectation is this time should not exceed 30 calendar days.
- 2) <u>Investigation Completion to ICC Review:</u> Time from conclusion of the investigation to ICC review of investigation results ranged from 1 day to 71 days. Average time was 15 days. The expectation is that the inmate will appear before ICC within 14 calendar days. This will allow staff a 2-week rotation period.

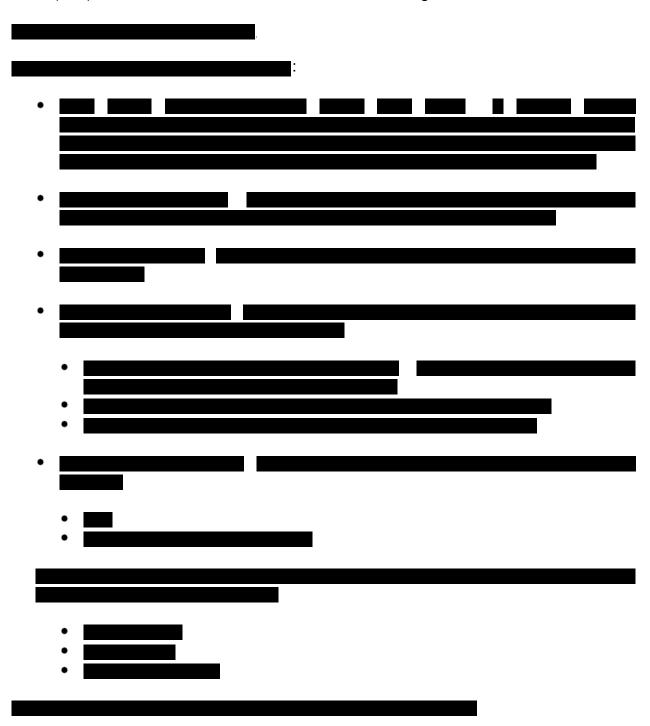
Prison Gang Investigation:

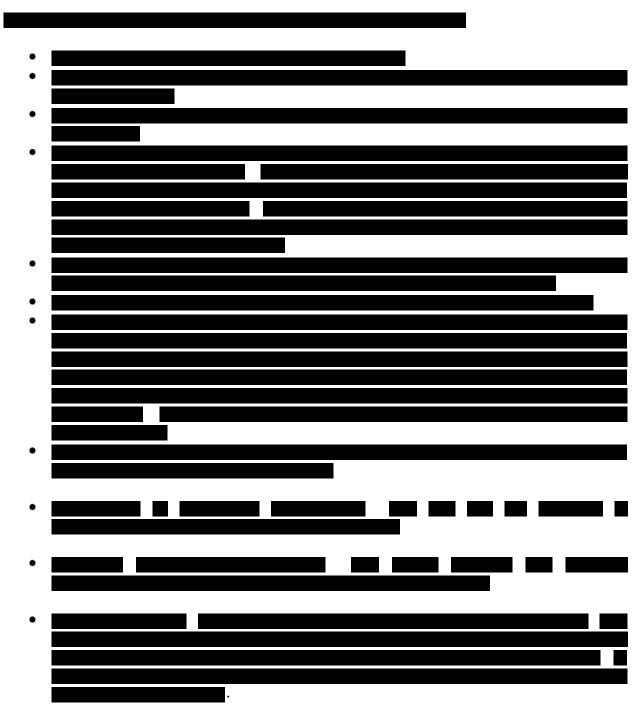
There were eight cases reviewed that were placed in Ad Seg based on Gang Investigation/Validation/Debriefing.

- 1) ASU Placement to Referral to Institution Gang Investigator (IGI) for Investigation: Days from ASU placement to IGI investigation assignment being received by IGI ranged from 1 day to 132 days. Average time was 33 days.
- 2) <u>Initiation of IGI investigation to Conclusion of Investigation:</u> Days from IGI investigation assignment to receipt of completed investigation ranged from 29 days to 125 days. Average time was 58 days.

Radio Communication

PBSP has no issues with usage of the 800 MHz Trunked Radio System and all PBSP staff are following all the required Public Safety Standards. However, the inmate/ward labor (IWL) area had unauthorized radios in use on State grounds.





Case Records

Holds, Warrants, and Detainers: In the Holds, Warrants, and Detainer portion of the audit, 19 components were reviewed. There were six areas listed below that need to be brought into compliance with the current policies and procedures as indicated in the above review portion of this report:

- Documentation on the Detainer Summary (CDC Form 850) of the date and time the warrant is received and the date and time entered into Offender Based Information Tracking System pursuant to Departmental Policies and Procedures need to be adhered to.
- Letters of inquiry are not always being generated to resolve potential holds based on the CDC Form 850s completed by Institution staff and/or complete any necessary follow-ups.
- The Warden's Checkout Order (CDC Form 661) is not always being forwarded to inmates pursuant to Departmental Policies and Procedures.
- Staff are not following desk procedures for tracking the return of the CDC Form 661 from inmate acknowledging receipt of warrants and giving him the appropriate disposition option pursuant to Departmental Policy and Procedure. As well as notifying the issuing agency.
- Desk procedures are not being followed for tracking timeserver warrants.
- Follow Departmental Policy and Procedure for the appropriate application of disposition on the CDC Form 661.

Warden's Checkout Order (CDC Form 161): In the Warden's Checkout Order portion of the audit, 3 components were reviewed. There are two areas listed below that need to be brought into compliance with the current policies and procedures as indicated in the above review portion of this report:

- The Notices Sent Pursuant to Penal Code, Sections 3058.6 and 3058.8, etc., on the CDC Form 161, need to include N/A, not applicable for those that do not apply.
- Information on the CDC Form 161 is not being verified for accuracy prior to sign off. The release dates, i.e., Controlling Discharge Date, needs to be verified for accuracy prior to signing off the Warden's Checkout Order.

Office of Audits and Compliance

Pelican Bay State Prison

GLOSSARY

Ad Seg	Administrative Segregation
AR	Accounts Receivable
ASU	
	Administrative Segregation Unit
CDC 1030	Confidential Information Disclosure
CDC 114-A1	Inmate Segregation Profile
CDC 114-D	Administrative Segregation Unit Placement Notice
CDC 128-G	Witnesses on the Classification Chrono
CDC 647	Personnel Action Request
CDC Form 661	Warden's Checkout Order
CDC Form 850	Detainer Summary
CPU	Computer Processing Unit
DA	District Attorney
DOM	Department Operations Manual
ICC	Information Classification Committee
IE	Investigative Employee
IGI	Institution Gang Investigator
ISU	Investigative Services Unit
IWL	Inmate/Ward Labor
LEF	Lethal Electrified Fence
PBSP	Pelican Bay State Prison
RVR	Rules Violation Report
Std. 897	Bilingual Pay Request Forms
TBAE	Test of Basic Adult Education

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION OFFICE OF AUDITS AND COMPLIANCE

PROGRAM COMPLIANCE REVIEW

REPORT OF FINDINGS

ADMINISTRATIVE SEGREGATION AND DUE PROCESS

PELICAN BAY STATE PRISON

APRIL 15 THROUGH APRIL 25, 2008



CONDUCTED BY

COMPLIANCE/PEER REVIEW BRANCH

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Pelican Bay State Prison

INTRODUCTION

This review of administrative segregation (Ad Seg) operations and due process provisions at the Pelican Bay State Prison (PBSP) was conducted by the Compliance/Peer Review Branch (CPRB), Office of Audits and Compliance, between the dates of April 14-18, 2008. The review team utilized the California Penal Code (PC), California Code of Regulations (CCR), Title 15, California Department of Corrections and Rehabilitation's (CDCR) Department Operations Manual (DOM), CDCR's Use of Force Policy, Administrative Bulletins (AB) 95/3R and 99/03, and Information Bulletins (IB) as the primary sources of operational standards. In addition, applicable court-ordered minimum standards established under Toussaint v. Gomez were used in this review as a benchmark for litigation avoidance.

This review was conducted by Tony Alleva, Facility Captain; Dave Stark, Correctional Counselor (CC) II; Mike Brown, Correctional Lieutenant; Al Sisneros, Correctional Lieutenant, Chuck Lester, Correctional Lieutenant, and Nancy Fitzpatrick, Associate Governmental Program Analyst, of the CPRB.

The review consisted of an on-site inspection, interviews with staff and inmates, reviews of procedures and other documentation, and observation of institutional operations.

The purpose of the CPRB review is one of overall analysis and evaluation of the Institution's compliance with the terms and conditions of State regulations and court-established standards.

Each area was reviewed by a minimum of two primary reviewers and cross-verified by other members of the team as possible. Overall, findings presented in the attached report represent the consensus of the entire review team.

Pelican Bay State Prison

REVIEW SCOPE AND METHODOLOGY

The CPRB conducted an on-site review at PBSP during the period of April 14-18, 2008. The purpose of this review was to assess the level of compliance with established State regulations and court-established standards in the areas of Ad Seg operations and due process provisions. This review and the attached findings represent the formal review of PBSP's compliance by CPRB.

The scope and methodology of this review was based upon written review procedures developed by the CPRB and provided to PBSP's staff in advance of the review.

Random sampling techniques were employed as an intrinsic part of the review process.

For the purposes of this review, facilities were toured by members of the review team, cell and tier inspections were conducted in the units, and randomly selected inmates were informally interviewed based upon their interest and willingness to talk to the reviewers.

Throughout the tour, on-duty staff at all levels (medical, counseling, management, administration, custody, and non-custody) were interviewed regarding current practices.

A random sample of 30 central files was reviewed. Utilizing "point-in-time" methodology, files were evaluated against all administrative requirements pertaining to the documents contained in those files.

Pelican Bay State Prison

EXECUTIVE SUMMARY

During this formal review of compliance with State regulations and court-established standards regarding Ad Seg operations and due process provisions at PBSP, the Facility was found to be in compliance with 48 (81 percent) of the 59 ratable areas. Three areas were found to be not ratable during this review.

Areas of concern were found in the following areas:

- ➤ Exercise. In Administrative Segregation Unit (ASU), the exercise yard is being offered at least three periods per week for a minimum of ten hours of outdoor exercise per week. However, in A1 and A2, inmates are only being offered 7 to 10 hours of outdoor exercise.
- Yard Group Designation on the Inmate Segregation Profile (CDC 114-A1). The review revealed that in a random sample of 29 CDC 114-A1s reviewed, 23 (79 percent) documented the inmate's current yard group designation. The 6 remaining CDC 114-A1s did not contain this information.
- ➤ CDC 114-A1 90-Day Update. The review revealed that in a random sample of 29 CDC 114-A1s reviewed, 2 were not ratable as the inmate had not been on Ad Seg status for a period of time long enough to require an update. Of the 27 ratable records, 22 (81 percent) were updated as appropriate. The 5 remaining CDC 114-A1s were not updated as required.
- ➤ Quarterly Fire Drills. Of the 36 required quarterly fire drills, documentation was provided to indicate that 11 (31 percent) had been conducted.
- ➤ Confidential Material. Of the 30 records reviewed, 28 were not ratable, as the reason(s) for Ad Seg placement was not based on confidential information. Of the 2 ratable records, 1 (50 percent), documented that the Confidential Information Disclosure (CDC 1030) was appropriate and issued within the required time frame. The 1 remaining record did not contain a CDC 1030.
- Administrative Review. Of the 30 records reviewed, 25 (83 percent) contained documentation of a placement review by a Captain within the first working day following the inmate's placement in Ad Seg. Of the 5 remaining records, 4 documented a late review by a Captain (1 to 3 days late) and 1 record did not

- document that an administrative review was conducted on a reissued Administrative Segregation Unit Placement Notice (CDC 114-D).
- ➤ Determination of Staff Assistance. Of the 30 records reviewed, 26 (87 percent) contained documentation of a determination for the assignment of a Staff Assistant (SA)/Investigative Employee (IE). Of the 4 remaining records, 3 left the IE section blank and 1 record did not document that an administrative review was conducted on a reissued CDC 114-D.
- ➤ Need for Witnesses on the CDC 114-D. Of the 30 records reviewed, 23 (77 percent) contained documentation regarding the need for witnesses. Of the 7 remaining records, 6 left the witness section entirely blank and 1 record did not document that an administrative review was conducted on a reissued CDC 114-D.
- ▶ Inmate Waiver. Of the 30 records reviewed, 22 (73 percent) contained documentation that the inmate made a determination regarding the 72-hour time limit or had refused to sign the waiver section. Of the 8 remaining records, 5 documented the inmate had waived the 72-hour time limit absent the inmate's signature, 2 records left this section blank, and 1 record did not document that an administrative review was conducted on a reissued CDC 114-D.
- ➤ Witnesses on the Classification Chrono (CDC 128-G). Of the 30 records reviewed, 22 were not ratable, as the need for witnesses was properly documented on the CDC 114-D. Of the 8 ratable records, 3 (38 percent) contained documentation regarding the need for witnesses on the CDC 128-G when the information was not otherwise properly documented on the CDC 114-D. The 5 remaining records did not contain this information.
- ➤ **Post Order—Job Site.** The review revealed that a current copy of the post order is provided at the job site for 37 (49 percent) of the 75 Ad Seg posts. The 38 remaining post orders were outdated.

A complete description of these finding areas may be found in the narrative section of this report.

PELICAN BAY STATE PRISON

COMPLIANCE RATING BY SUBJECT AREA

SECTION REVIEWED	NO. OF ITEMS REVIEWED	NO. IN COMPLIANCE	SECTION SCORE
Conditions of Segregated Housing	30	26	87%
Due Process	22	16	73%
Administration	10	9	90%

Pelican Bay State Prison

SUMMARY CHART (SYMBOL DEFINITIONS)

The following chart represents individual review findings in relation to the CCR, Title 15, DOM, PC, and ABs. In addition, applicable court-ordered minimum standards established under **Toussaint v. Gomez** are being used in this review as a benchmark for litigation avoidance.

Each of the items is rated as to whether or not the Institution is in compliance. The chart utilizes the following symbols to denote compliance ratings:

SYMBOL	DEFINITION			
Compliance (C):	The requirement is being met.			
Partial Compliance (P/C):	The institution is clearly attempting to meet the requirement, but significant discrepancies currently exist.			
Non Compliance (N/C):	The institution is clearly not meeting the requirement.			
Not Applicable (N/A):	Responsibility for compliance in this area is not within the authority of this institution.			
Not Ratable (N/R):	No measurable instances.			

At the end of the chart is a Comparative Statistical Summary Chart of Review Findings. This summary presents a mathematical breakdown of compliance by total items and percentages (%).

Pelican Bay State Prison

SUMMARY CHART

REVIEW STANDARD	REVIEW FINDING 6/07	REVIEW FINDING 4/08	PAGE NO.
I. CONDITIONS OF SEGREGATED HOUSING			
Living Conditions.	С	С	1
a. Housekeeping and Maintenance.	С	С	2
b. Vector Control.	С	С	2
2. Restrictions.	С	С	3
3. Clothing.	С	С	3
4. Meals.	С	С	4
5. Mail.	С	С	4
6. Visits.	С	С	5
7. Personal Cleanliness.			
a. Showering.	С	С	6
b. Haircuts.	С	С	6
c. Laundry Items.	С	С	6
8. Exercise.	С	P/C	7
9. Reading Material.	С	С	7
10. Rule Changes.	С	С	8

REVIEW STANDARD	REVIEW FINDING 6/07	REVIEW FINDING 4/08	PAGE NO.
11. Telephones.	С	С	8
12. Institution Programs and Services.	С	С	9
13. Visitation and Inspection.	С	С	9
a. Medical Attention.	С	С	10
14. Management Cells.			
a. Placement.	N/R	N/R	11
b. Reporting.	N/R	N/R	11
c. Transfer.	N/R	N/R	12
15. Access to the Courts.	С	С	12
16. Isolation Log Book.	С	С	13
17. Inmate Daily Segregation Record (CDC 114-A).	С	С	13
 a. All significant information documented. 	С	С	13
b. CDC 114-A1 notes yard group designation.	P/C	P/C	14
c. The CDC 114-A1 notes special information.	С	С	14
d. The CDC 114-A1 is updated every 90 days.	P/C	P/C	14
18. Safety.			
a. Fire Safety.	С	С	15
b. Quarterly Fire Drills.	P/C	N/C	16
c. Documentation.	С	С	16

	REVIEW STANDARD	REVIEW FINDING 6/07	REVIEW FINDING 4/08	PAGE NO.
II.	DUE PROCESS			
1.	Authority.	С	С	17
2.	Written Notice.	С	С	17
3.	Receipt of CDC 114-D.	С	С	18
4.	Confidential Material.	С	P/C	18
5.	Review.	P/C	P/C	19
	a. Staff Assistance.	P/C	P/C	19
	b. Witnesses.	P/C	P/C	20
	c. Inmate Waiver of Time Limitations.	P/C	P/C	20
	d. Hearing Time Constraints.	С	С	21
	e. Decision.	С	С	22
6.	Hearing Within 10 Days.	С	С	22
	 Determinations documented on the CDC 128-G. 	С	С	23
	b. Hearing Date.	С	С	23
	c. Inmate Presence.	С	С	24
	d. Hearing Officer.	С	С	24
	e. SA/IE on CDC 128-G.	С	С	24
	f. Witnesses on CDC 128-G.	P/C	N/C	25
	g. The CDC 128-G notes yard group designation.	С	С	25

	REVIEW STANDARD	REVIEW FINDING 6/07	REVIEW FINDING 4/08	PAGE NO.
	h. Cell Status.	С	С	26
	i. Participation.	С	С	26
7.	Classification Review.	С	С	27
8.	Classification Staff Representative (CSR) Review.	С	С	27
III.	ADMINISTRATION			
1.	Training.	С	С	28
2.	The Institution Classification Committee (ICC).	С	С	29
3.	Record of Disciplinary.	С	С	29
4.	Post Orders-Firearms.	С	С	30
5.	Post Order—Job Site.	С	N/C	30
6.	Signing of Post Orders.	С	С	31
	a. Post Orders-Staff.	С	С	31
	b. Supervisor Inspection.	С	С	32
	c. Post Order-Acknowledgment.	С	С	32
7.	Protective Vests.	С	С	33

Pelican Bay State Prison

COMPARATIVE STATISTICAL SUMMARY CHART

JUNE 2007—APRIL 2008 FINDINGS

RATING	TOTAL 6/07	RATING % 6/07	TOTAL 4/08	RATING % 4/08
COMPLIANCE	59	89%	48	81%
PARTIAL COMPLIANCE	8	11%	8	14%
NONCOMPLIANCE	0		3	5%
NOT RATABLE	3		3	
TOTAL	70	100%	62	100%

Pelican Bay State Prison

SUMMARY OF FACILITIES REVIEWED

PBSP includes 496 Ad Seg unit beds in this Level I and IV Facility. At the time of this review, the Facility was housing 321 Ad Seg inmates.

For the purposes of the review, the CPRB toured the Ad Seg units, reviewed unit records, and interviewed unit staff to determine the degree of compliance with established departmental policy, procedures, guidelines, and relevant court-established standards.

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CONDITIONS OF SEGREGATED HOUSING

1. **Living Conditions.** In keeping with the special purpose of a segregated housing unit, and with the degree of security, control, and supervision required to serve that purpose, the physical facilities of special purpose segregated housing will approximate those of the general population.

(Authority cited: PC, Sections 2084, 5054, and 5058. Reference: CCR, Title 15, Sections 3343(a) and 3345; and DOM, Section 52080.33.)

Findings

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that the physical facilities of PBSP's Ad Seg units approximate those of the general population.

a. Housing units and all facilities therein will be properly maintained and regularly inspected to insure human decency and sanitation.

(Reference: CCR, Title 15, Section 3345.)

Findings

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that inmates housed in PBSP's Ad Seg units are provided a clean, properly maintained cell that approximates those of general population inmates. Telephonic and written repair requests are submitted to Plant Operations when repairs are needed. General repairs are completed in a timely manner. Emergency work requests and health and safety issues are completed immediately.

b. Control of vermin and pests will be maintained by a regular inspection by the institutional vector control.

(Authority cited: Toussaint vs. McCarthy. Reference: CCR, Title 15, Section 3345.)

Findings

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that PBSP's Ad Seg units control vermin and pests by conducting regular inspections of the units. Regular inspections and pesticide applications provide for the control of vermin and pests. In the event of an infestation, the Ad Seg unit Sergeants notify Plant Operations and the situation is responded to immediately.

2. **Restrictions.** Whenever an inmate in Ad Seg is deprived of any usually authorized item or activity and the action and reason for that action is not otherwise documented and available for review by administrative and other concerned staff, a report of the action will be made and forwarded to the unit administrator as soon as possible.

(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(b); and DOM, Section 52080.33.1.)

Findings

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that unit staff utilize an Informational Chrono (CDC 128-B) to notify appropriate administrative staff as required.

3. **Clothing.** No inmate in Ad Seg will be required to wear clothing that significantly differs from that worn by other inmates in the unit, except that temporary adjustments may be made in an inmates' clothing as is necessary for security reasons or to protect the inmate from self-inflicted harm. No inmate will be clothed in any manner intended to degrade the inmate.

(Authority cited: PC, Sections 2084 and 5058. Reference: CCR, Title 15, Section 3343(c); and DOM, Section 52080.33.2.)

Findings

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed no instances wherein inmates housed in the Ad Seg units were required to wear clothing that significantly differed from that worn by other inmates in the units; nor were inmates clothed in a manner intended to degrade or humiliate.

4. **Meals.** Inmates assigned to Ad Seg, including special purpose segregated housing, will be fed the same meal and ration as is provided for inmates of the general population, except that a sandwich meal may be served for lunch. Deprivation of food will not be used as punishment.

(Authority cited: PC, Sections 2084 and 5058. Reference: CCR, Title 15, Section 3343(d); and DOM, Section 52080.33.3.)

Findings

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, reviewed unit documentation and interviewed unit staff and inmates.

The review revealed that inmates housed in the Ad Seg units are receiving the same meals and rations as provided for the general population inmates. No examples of food deprivation were found in the unit. Food items are prepared in the satellite kitchen and transported to the units in individual serving trays where unit staff serve the inmate population. Unit staff are attired with head coverings and plastic gloves when serving. Meal sample reports and food temperature logs are being utilized by kitchen staff.

5. **Mail.** Inmates assigned to Ad Seg, including special purpose segregated housing, will not be restricted in their sending and receiving of personal mail, except that incoming packages may be limited in number, and in content, to that property permitted in the segregated unit to which an inmate is assigned.

(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Sections 3138 and 3343(e); and DOM, Section 52080.33.4.)

Findings

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that inmates housed in the Ad Seg units are not restricted from either sending or receiving personal mail, except those restrictions as defined in the CCR.

6. **Visits.** Inmates assigned to segregated housing, except for inmates assigned to security housing unit (SHU), in accordance with Section 3341.5, shall be permitted to visit under the same conditions as are permitted inmates of the general population. Inmates assigned to SHUs shall be prohibited from physical contact with visitors.

(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(f); and DOM, Section 52080.33.5.)

<u>Findings</u>

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that all Ad Seg inmates are restricted to non-contact visits. The review team found PBSP's Ad Seg visiting process to be in accordance with current departmental and institutional policy and procedures.

7. **Personal Cleanliness.** Inmates assigned to Ad Seg, including special purpose segregated housing, will be provided the means to keep themselves clean and well groomed.

(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(g); and DOM, Section 52080.33.6.)

a. Showering and shaving will be permitted at least three times a week.

Findings

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that showers are available in the Ad Seg units. Ad Seg inmates are provided the opportunity to shower three times per week as required. Razors for shaving are provided during shower periods.

b. Haircuts will be provided as needed.

Findings

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that haircutting equipment is available, upon request, for use in the holding cells.

c. Clothing, bed linen, and other laundry items will be issued and exchanged no less often than is provided for general population inmates.

Findings

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that clothing, bed linen, and other laundry items are routinely issued upon reception in the Ad Seg units. These laundry items are exchanged on the same basis as the general population.

8. **Exercise.** Inmates assigned to special purpose segregation housing will be permitted a minimum of one hour per day, five days a week, of exercise outside their rooms or cells unless security and safety considerations preclude such activity. When special purpose segregated housing units are equipped with their own recreation yard, the yard periods may substitute for other out of cell exercise periods, providing the opportunity for use of the yard is available at least three days per week for a total of not less than ten hours a week.

(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(h).)

Findings

PARTIAL COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that the PBSP Ad Seg units only classify inmates into walk-alone yard group designations. In ASU, inmates are being offered at least three exercise periods per week for a minimum of ten hours of outdoor exercise per week. However, in A1 and A2, inmates are only being offered 7 to 10 hours of outdoor exercise.

9. Reading Material. Inmates assigned to Ad Seg, including special purpose segregated housing, will be permitted to obtain and possess the same publications, books, magazines, and newspapers, as are inmates of the general population, except that the quantity may be limited for safety and security reasons. Library services will be provided and will represent a cross-section of material available to the general population.

(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(i).)

Findings

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that Ad Seg inmates are provided library books once a week, upon request. The books are requested from the unit officers who distribute the reading material on Second and Third Watches.

10. **Rule Changes.** The Notice of Change to the CCR shall be posted and made available to all inmates and staff. Notices shall be posted in inmate housing unit, corridors, and other areas easily accessible to inmates, and provided to inmate lock-up unit. The Classification and Parole Representative shall ensure that the inmate population has knowledge of the Board of Prison Terms/Narcotic Addiction Evaluation Authority Rules and of amendments.

(Authority cited: PC, Sections 2080 and 5058(a). Reference: DOM, Sections 12010.5.8 and 12010.8.)

Findings

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that proposed changes, or changes to the Director's Rules, the DOM, ABs, and memorandums that affect the inmate population are conspicuously posted in inmate movement areas.

11. **Telephones.** Institutions will establish procedures for the making of outside telephone calls by inmates in Ad Seg. Such procedures will approximate those for the work/training incentive group to which the inmate is assigned, except that individual calls must be approved by the supervisor in charge or the administrator of the unit before a call is made.

(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(j).)

Findings

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that PBSP provides Ad Seg inmates telephone usage pursuant to CCR, Title 15, Section 3343(j). This includes emergency usage only.

12. **Institution Programs and Services.** Inmates assigned to segregated housing unit will be permitted to participate and have access to such programs and services as can be reasonably provided within the unit without endangering the security or the safety of persons. Such programs and services will include, but are not limited to: education, commissary, library services, social services, counseling, religious guidance, and recreation.

(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(k).)

Findings

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that PBSP provides programs to include commissary, library services, recreation, and spiritual counseling. In addition, religious publications are provided upon request.

13. **Visitation and Inspection.** Inmates assigned to Ad Seg, including special purpose segregated units, will be seen daily by the custodial supervisor in charge of the unit and by a physician, registered nurse, or medical technical assistant and, by request, members of the program staff. A timely response should be given to such requests wherever reasonably possible.

(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(I).)

<u>Findings</u>

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that a custody supervisor is assigned to the Ad Seg units on both Second and Third Watches. In addition, management staff are available for interviews prior to ICC hearings and CDC 114-D segregation placement administrative reviews. The Facility Sergeants tour the units during First Watch to ensure any emergency is properly addressed. Medical and psychiatric staff are assigned to the units on Second (medical and psychiatric staff) and Third Watches (medical staff only) passing out medication, collecting sick call slips, and screening for medical and mental health needs. During First Watch, medical and psychiatric staff are available to respond to emergencies from the Correctional Treatment Center upon request by unit staff.

a. The custodial officer in charge of a disciplinary detention unit, segregation unit, or SHU, where inmates are segregated for disciplinary or administrative purposes, will ensure that inmates needing medical attention receive it promptly.

(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3345.)

<u>Findings</u>

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that unit custody staff notify medical staff in the event of any medical situation or emergency. The medical treatment line is held Monday through Friday.

14. **Management Cells.** Inmates assigned to segregated housing, who persist in disruptive, destructive, and dangerous behavior and will not heed or respond to orders and warnings to desist, are subject to placement in a management cell, as provided in CCR, Title 15, Section 3332(f).

(Authority cited: PC, Sections 2601(d), 5054, and 5058. Reference: CCR, Title 15, Section 3343(m).

a. An inmate who persists in unduly disruptive, restrictive, or dangerous behavior and who will not heed or respond to orders and warnings to desist from such activity, may be placed in a management cell on an order of the unit's administrator or, in his or her absence, an order of the watch commander.

Findings

NOT RATABLE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that PBSP does not utilize management cells.

b. In addition to any necessary incident or disciplinary reports, the matter will be reported to the Warden, Superintendent, Chief Disciplinary Officer, or Administrative Officer of the Day (AOD), one of whom will review management cell resident status daily.

Findings

NOT RATABLE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that PBSP does not utilize management cells.

c. An inmate, who requires management cell placement for longer than 24 hours, will be considered for transfer to a psychiatric management unit or other housing appropriate to the inmate's disturbed state.

(Reference: CCR, Title 15, Section 3332(f); and DOM, Section 52080.22.4.)

Findings

NOT RATABLE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that PBSP does not utilize management cells.

15. **Access to the Courts.** Inmates confined in Ad Seg for any reason will not be limited in their access to the courts. If an inmate's housing restricts him or her from going to the inmate law library, arrangements will be made to deliver requested and available library material to the inmate's quarters.

(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Sections 3164(a) and (d); DOM, Section 53060.10; and Toussaint v. Gomez.)

<u>Findings</u>

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed PBSP provides both paging and direct access to a law library. Inmates submit written requests for law library services. These requests are processed and access times for inmates requesting service are established. The preferred legal users and inmates with court deadlines receive priority access.

16. Ad Seg Log. An Isolation Log Book (CDC 114) will be maintained in each Ad Seg unit, including special purpose segregated units. One CDC 114 may serve two or more special purpose units which are administered and supervised by the same staff members.

(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3344(a); and DOM, Section 52080.22.5.)

Findings

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that a CDC 114 is maintained within the Ad Seg units. All entries are appropriately recorded in accordance with departmental policy and procedures.

17. **Daily Inmate Segregation Record.** A separate record will be maintained for each inmate assigned to Ad Seg, including special purpose segregated units. This record will be compiled on the CDC 114-A and the CDC 114-A1.

(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3344(b); DOM, Section 52080.22.5; and IB 98/27.)

 All significant information relating to the inmate during the course of segregation, from reception to release, will be entered on the CDC 114-A in chronological order.

Findings

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that a CDC 114-A is maintained for each inmate assigned to the Ad Seg units. The CDC 114-As were found to contain significant information, in chronological order, relating to the inmate during the course of segregation (with the exception of yard group designation).

b. The CDC 114-A1 documents the inmate's current yard group designation.

Findings

PARTIAL COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that in a random sample of 29 CDC 114-A1s reviewed, 23 (79 percent) documented the inmate's current yard group designation. The 6 remaining CDC 114-A1s did not contain this information.

c. The CDC 114-A1 documents the inmate's special information.

Findings

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

Each (100 percent) of the 29 CDC 114-A1s reviewed documented the inmate's special information.

d. The CDC 114-A1 will be maintained in the segregation log and be updated as new information is obtained. The Segregation Officer shall begin a new CDC 114-A1 at least every 90 days or at anytime this form becomes difficult to read.

<u>Findings</u>

PARTIAL COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that in a random sample of 29 CDC 114-A1s, 2 were not ratable as the inmate had not been on Ad Seg status for a period of time long enough to require an update. Of the 27 ratable records, 22 (81 percent) were updated as appropriate. The 5 remaining CDC 114-A1s were not updated as required.

18. **Safety.** Each Warden and Superintendent must have in effect, at all times, a plan approved by the Director for meeting emergencies delineated and required by the California Emergency Services Act of 1970.

(Authority cited: PC, Sections 5454 and 5458. Reference: CCR, Title 15, Sections 3302(b)(4) and 3303(a)(4); and DOM, Sections 52090.1, 2, 5, 6.1, 7, and 52090.19.)

a. Institution heads shall maintain procedures for fire prevention and suppression. Fire protection practices and departmental policy mandate that all employees be instructed and trained concerning their duties and responsibilities should it become necessary to conduct an emergency evacuation for any fire or life threatening condition.

(Reference: CCR, Title 15, Section 3303(a); and DOM, Section 2090.19.)

Findings

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that PBSP's Ad Seg units maintain a policy regarding fire protection and training.

b. Staff and inmates shall be familiar with fire evacuation routes, exits, and procedures. An evacuation drill shall be conducted quarterly on each watch. Where such drills would jeopardize personal safety or facility security, staff shall conduct a walk-though of the procedure. Such walk-through drills shall be monitored by the area supervisor to ascertain that actual evacuation could be accomplished as required.

(Reference: CCR, Title 15, Section 3303(a); and DOM, Section 52090.19.)

Findings

NONCOMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that staff are trained with emergency evacuation plan procedures and evacuation routes are conspicuously posted within the units. However, emergency simulated fire drills are not consistently being conducted under varied conditions and on all three Watches. Of the 36 required quarterly fire drills, documentation was provided to indicate that 11 (31 percent) had been conducted.

c. At the conclusion of fire drills, the area supervisor shall complete a Fire Drill Report (DS 5003) indicating the necessary information and forward a copy to the Fire Chief.

(Reference: CCR, Title 15, Section 3303(a)(4); and DOM, Section 52090.19.)

Findings

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that when quarterly simulated emergency fire drills are conducted, DS 5003s are being completed and forwarded to the Fire Chief as required.

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DUE PROCESS

Procedural safeguards essential for effective transfers of prisoners from the general prison population to a maximum security unit in order to segregate such prisoners for administrative reasons or purposes.

1. **Authority.** Authority to order an inmate to be placed in Ad Seg, before such action is considered and ordered by a classification hearing, may not be delegated below the staff level of Correctional Lieutenant, except when a lower level staff member is the highest ranking official on duty.

(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3336; and DOM, Section 52080.25.)

<u>Findings</u>

COMPLIANCE

The CPRB examined 30 central files of inmates housed in PBSP's Ad Seg units.

Of the 30 records reviewed, 28 (93 percent) contained documentation on the CDC 114-D to confirm the level of the official ordering segregation placement was at the Correctional Lieutenant level or higher. The 2 remaining records documented the official ordering placement was an acting Lieutenant.

 Written Notice. The reason for ordering an inmate's placement in Ad Seg will be clearly documented on a CDC 114-D by the official ordering the action at the time the action is taken.

(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3336(a); DOM, Section 52080.25; and IB 98/27.)

<u>Findings</u>

COMPLIANCE

The CPRB examined 30 central files of inmates housed in PBSP's Ad Seg units.

Of the 30 records reviewed, 28 (93 percent) clearly documented the date and reason(s) for Ad Seg placement. Of the 2 remaining records, 1 did not document the date of placement in Ad Seg on a reissued CDC 114-D and 1 record did not document the use of, nor the disclosure date of, confidential information relied upon for placement in Ad Seg.

3. **Receipt of CDC 114-D.** A copy of the CDC 114-D with the "order" portion of the form completed, will, if practical, be given to the inmate prior to placement in Ad Seg, but not later than 48 hours after such placement.

(Authority: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Sections 3336(d) and 3339(b)(1); and DOM, Section 52080.25.)

Findings

COMPLIANCE

The CPRB examined 30 central files of inmates housed in PBSP's Ad Seg units.

Each (100 percent) of the 30 records reviewed contained documentation that indicated the inmate was given a copy of the CDC 114-D within 48 hours of placement.

4. **Confidential Material.** Documentation given the inmate concerning information from a confidential source shall include an evaluation of the source's reliability, a brief statement of the reason for the conclusion reached, and a statement of the reason why the information or source is not disclosed.

(Authority: PC, Sections 2081.5, 2600, 2601, 5054, and 5058. Reference: CCR, Title 15, Section 3321(b)(2); and DOM, Sections 52080.27.4 and 61020.9.)

PARTIAL COMPLIANCE

The CPRB examined 30 central files of inmates housed in PBSP's Ad Seg units.

Of the 30 records reviewed, 28 were not ratable, as the reason(s) for Ad Seg placement was not based on confidential information. Of the 2 ratable records, 1 (50 percent), documented that the CDC 1030 was appropriate and issued within the required time frame. The 1 remaining record did not contain a CDC 1030.

5. **Review.** On the first work day following an inmate's placement in Ad Seg, designated staff at not less than the level of Correctional Captain will review the order portion of the CDC 114-D. If retention in Ad Seg is approved at this review, the following determinations will be made at this level.

(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3337).)

<u>Findings</u>

PARTIAL COMPLIANCE

The CPRB examined 30 central files of inmates housed in PBSP's Ad Seg units.

Of the 30 records reviewed, 25 (83 percent) contained documentation of a placement review by a Captain within the first working day following the inmate's placement in Ad Seg. Of the 5 remaining records, 4 documented a late review by a Captain (1 to 3 days late) and 1 record did not document that an administrative review was conducted on a reissued CDC 114-D.

a. Determine the appropriate assignment of Staff Assistance. (Reference: CCR, Title 15, Section 3337(a).)

<u>Findings</u>

PARTIAL COMPLIANCE

The CPRB examined 30 central files of inmates housed in PBSP's Ad Seg units.

Of the 30 records reviewed, 26 (87 percent) contained documentation of a determination for the assignment of a SA/IE. Of the 4 remaining records, 3 left the IE section blank and 1 record did not document that an administrative review was conducted on a reissued CDC 114-D.

b. Determine the inmate's desire to call witnesses or submit other documentary evidence. If the inmate requests the presence of witnesses or submission of documentary evidence at the classification hearing on the reason or need for retention in segregated housing, an IE will be assigned to the case. A request to call witnesses must be submitted in writing by the inmate.

(Reference: CCR, Title 15, Section 3337(b).)

Findings

PARTIAL COMPLIANCE

The CPRB examined 30 central files of inmates housed in PBSP's Ad Seg units.

Of the 30 records reviewed, 23 (77 percent) contained documentation regarding the need for witnesses. Of the 7 remaining records, 6 left the witness section entirely blank and 1 record did not document that an administrative review was conducted on a reissued CDC 114-D.

c. Determine if the inmate has waived the 72-hour time limit in which a classification hearing cannot be held, as indicated on the CDC 114-D or the inmate desires additional time to prepare for a classification hearing. (Reference: CCR, Title 15, Section 3337(c).)

PARTIAL COMPLIANCE

The CPRB examined 30 central files of inmates housed in PBSP's Ad Seg units.

Of the 30 records reviewed, 22 (73 percent) contained documentation that the inmate made a determination regarding the 72-hour time limit or had refused to sign the waiver section. Of the 8 remaining records, 5 documented the inmate had waived the 72-hour time limit absent the inmate's signature, 2 records left this section blank, and 1 record did not document that an administrative review was conducted on a reissued CDC 114-D.

d. Determine the most appropriate date and time for a classification hearing based upon the determination arrived at under Section 3337(a), (b), and (c), and the time limitations prescribed in CCR, Title 15, Section 3338.

(Reference: CCR, Title 15, Section 3337 (d).)

Findings

COMPLIANCE

The CPRB examined 30 central files of inmates housed in PBSP's Ad Seg units.

Each (100 percent) of the 30 records reviewed contained documentation that the hearing time frames were appropriate based on the inmate's request.

e. Decision to retain in Ad Seg or release to unit/facility.

Findings

COMPLIANCE

The CPRB examined 30 central files of inmates housed in PBSP's Ad Seg units.

Of the 30 records reviewed, 29 (97 percent) contained documentation that a decision was made to retain or release the inmate based on the administrative review. The 1 remaining record did not document that an administrative review was conducted on a reissued CDC 114-D.

6. Classification Hearing. An inmate's placement in temporary segregation shall be reviewed by the ICC within ten days of receipt in the unit.

(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Sections 3335(c), 3338(a), (b), (c), (d), (g), (h), (i), 3375, and 3339 (b) (2); and DOM, Sections 52080.27.4 and 62010.9.1.)

Findings

COMPLIANCE

The CPRB examined 30 central files of inmates housed in PBSP's Ad Seg units.

Of the 30 records reviewed, 29 (97 percent) contained documentation of an ICC review within 10 days of an inmate's placement in Ad Seg. The 1 remaining record documented a late ICC review (26 days late).

a. The determinations arrived at in the classification hearing will be documented on the CDC 128-G. Such documentation will include an explanation of the reason and the information and evidence relied upon for the action taken. The inmate will also be given copies of all completed forms and of all other documents relied upon in the hearing, except those containing confidential information.

(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Sections 3338(i), 3375(g), and (h); and DOM, Sections 52080.27.4 and 62010.9.1.)

Findings

COMPLIANCE

The CPRB examined 30 central files of inmates housed in PBSP's Ad Seg units.

Of the 30 records reviewed, 29 (97 percent) contained documentation of the determinations arrived at during ICC on the CDC 128-G. The 1 remaining record did not address the due process errors on the CDC 114-D, specifically, no administrative review was conducted.

b. Was the hearing date recorded on the CDC 128-G?

(Reference: CCR, Title 15, Section 3375(g)(9); and DOM,

Section 62010.9.1.)

Findings

COMPLIANCE

The CPRB examined 30 central files of inmates housed in PBSP's Ad Segunits.

Each (100 percent) of the 30 records reviewed contained the appropriate hearing dates on the CDC 128-Gs.

c. Was the inmate's presence at the hearing documented on the CDC 128-G?

(Reference: CCR, Title 15, Sections 3338(c) and 3375(g)(5); and DOM, Section 52080.27.)

Findings

COMPLIANCE

The CPRB examined 30 central files of inmates housed in PBSP's Ad Seg units.

Each (100 percent) of the 30 records reviewed contained documentation to verify the inmate's presence or absence at the hearing on the CDC 128-G.

d. Were the Hearing Officers identified on the CDC 128-G?

(Reference: CCR, Title 15, Sections 3375(g)(6-8); DOM,

Section 62010.9.1.)

Findings

COMPLIANCE

The CPRB examined 30 central files of inmates housed in PBSP's Ad Seg units.

Each (100 percent) of the 30 records reviewed identified the hearing officers on the CDC 128-G.

e. If appropriate, were the SA and the IE identified in the CDC 128-G?

(Reference: CCR, Title 15, Section 3338(c)(i); and DOM,

Section 62010.9.1.)

COMPLIANCE

The CPRB examined 30 central files of inmates housed in PBSP's Ad Seg units.

Of the 30 records reviewed, 26 were not ratable as the need for a SA/IE was properly documented on the CDC 114-D. Each (100 percent) of the 4 remaining records documented the need for a SA/IE on the CDC 128-G when this information was not otherwise properly documented on the CDC 114-D.

f. If appropriate, was the witness portion addressed in the CDC 128-G? (Reference: CCR, Title 15, Sections 3338(h) and (i); and DOM, Sections 52080.27.3-.4.)

Findings

NONCOMPLIANCE

The CPRB examined 30 central files of inmates housed in PBSP's Ad Seg units.

Of the 30 records reviewed, 22 were not ratable, as the need for witnesses was properly documented on the CDC 114-D. Of the 8 ratable records, 3 (38 percent) contained documentation regarding the need for witnesses on the CDC 128-G when the information was not otherwise properly documented on the CDC 114-D. The 5 remaining records did not contain this information.

g. The completed CDC 128-G contains the yard group designation arrived at during the classification hearing.

(Reference: CCR, Title 15, Section 3338(i); DOM, Section 52080.27.4; and IB 98/27.)

COMPLIANCE

The CPRB examined 30 central files of inmates housed in PBSP's Ad Seg units.

Of the 30 records reviewed, 29 (97 percent) contained documentation of the inmate's yard group designation on the CDC 128-G. The 1 remaining record did not contain this information.

h. The completed CDC 128-G documents the inmate's current cell status (single or double celled).

(Reference: CCR, Title 15, Section 3338(i); DOM, Section 52080.27.4; and IB 97/27.)

Findings

COMPLIANCE

The CPRB examined 30 central files of inmates housed in PBSP's Ad Seg units.

Of the 30 records reviewed, 29 (97 percent) contained documentation of the inmate's current cell status on the CDC 128-G. The 1 remaining record did not contain this information.

i. The completed CDC 128-G documents the inmate's participation during committee and their agreement or disagreement with the ICC's action.

(Reference: CCR, Title 15, Sections 3338(i) and 3375(f)(2-6); and DOM, Section 52080.27.4.)

COMPLIANCE

The CPRB examined 30 central files of inmates housed in PBSP's Ad Seg units.

Each (100 percent) of the 30 records reviewed contained documentation of the inmate's participation during ICC on the CDC 128-G.

7. Classification Review. Instead of ICC reviewing each inmate's case every 30 days, inmates in Ad Seg for non-disciplinary reasons shall require routine review no more frequently than every 90 days or when scheduled by staff for specific action. Inmates segregated for disciplinary reasons shall be reviewed by ICC at least every 180 days or when scheduled by staff for specific action.

(Authority cited: Larry Witek Memorandum of Interim Action dated November 20, 2001, Ad Seg Unit Classification Review.)

Findings

COMPLIANCE

The CPRB examined 30 central files of inmates housed in PBSP's Ad Segunits.

Of the 30 records reviewed, 12 were not ratable as the inmate had not been on Ad Seg status long enough to require a follow-up review. Of the 18 ratable records, 17 (94 percent) contained documentation of an ICC review as appropriate. The 1 remaining record documented a 90-day update was held 30 days late.

8. **CSR Review.** All inmates retained in Ad Seg at their ten-day Ad Seg hearing shall be referred to the CSR for retention authorization at that initial review.

(Authority cited: Larry Witek Memorandum of Interim Action dated November 20, 2001, Ad Seg Unit Classification Review.)

COMPLIANCE

The CPRB examined 30 central files of inmates housed in PBSP's Ad Seg units.

Each (100 percent) of the 30 records reviewed contained documentation that indicated the case had been referred to a CSR, after initial classification, for review as appropriate.

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ADMINISTRATION

1. **Training.** All staff working in specialized units are to receive specialized training centering around that unit's operation and program.

(Authority cited: PC, Sections 830.5, 832, 5054, 5058, 13600, and 13601. Reference: DOM, Section 32010.14.5.)

Findings

COMPLIANCE

The CPRB interviewed In-Service Training staff and examined the training records of all Ad Seg staff assigned to the unit for one year or more.

The review revealed that 24 custody staff have been assigned to the Ad Seg units for one year or more. These 24 staff members are each required to have received 11 specialized training classes annually. Of the 264 required classes, 253 (96 percent) have been taken.

- 2. **Institution Classification Committee.** The ICC shall consist of:
 - Warden or Regional Parole Administrator, or Deputy Warden or Assistant Regional Parole Administrator (chairperson);
 - Correctional Administrator or Parole Administrator III (alternate Chairperson);
 - Psychiatrist or Physician;
 - Facility Captain;
 - Correctional Captain;
 - CC III or Parole Agent III, or CC II or Parole Agent II (Committee Recorder);
 - Assignment Lieutenant;
 - Educational or Vocational Program Representative; and
 - Other Staff as required.

(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3376(c)(2); and DOM, Section 62010.8.2.)

<u>Findings</u>

COMPLIANCE

The CPRB examined 30 central files and reviewed CDC 128-Gs and observed ICC.

The review revealed that the composition of ICC was in compliance with this standard.

3. **Record of Disciplinary.** All institutions will maintain a Register of Institution Violations. A Register of Institution Violations is a compilation of one completed copy of each rule violation report issued at a facility, maintained in chronological order.

(Authority cited: PC, Sections 2081, 5054, and 5058. Reference: CCR, Title 15, Sections 3326(a)(1-2); and DOM, Section 52080.15.1.)

COMPLIANCE

The CPRB interviewed appropriate staff and examined the Disciplinary Log and Register of Institutional Violations.

The review revealed that the Institution maintains a Register of Institutional Violations that meets the basic requirements of DOM. A tracking system is used to follow each disciplinary log number and adjudicated Rules Violation Report.

4. **Post Order—Firearms.** Detailed instructions regarding the use of firearms shall be contained in the post orders of armed posts and shall be issued to staff that may regularly be required to use firearms in the course of their duties.

(Authority cited: PC, Sections 830, 832.5, 5054, and 5058. Reference: DOM, Section 55050.4.)

Findings

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that there are 13 identified gun posts that require use of force policies be addressed as part of the post orders. Each (100 percent) of the 13 armed posts were current and directed the staff member to read, understand, and become familiar with the departmental Use of Force Policy.

5. **Post Order—Job Site.** A copy of the post order shall be provided for every post and a copy shall be physically located at each job site.

(Authority cited: PC, Sections 5054 and 5058. Reference: DOM, Section 51040.6.)

NONCOMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that a current copy of the post order is provided at the job site for 37 (49 percent) of the 75 Ad Seg posts. The 38 remaining post orders were outdated.

6. Employees under post orders are required to sign and date the Post Order Acknowledgment Form (CDC 1860), verifying their understanding of the duties and responsibilities of the post. This shall be completed when the employee is assigned to the post, when the post order has been revised, or upon returning from an extended absence.

Findings

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed there are 104 identified staff who are assigned to the 75 Ad Seg unit posts. Of the 114 required signatures, 102 (90 percent) were present acknowledging the understanding of the post orders.

a. Post Order—Staff. Supervisors, by authority of the Correctional Captain or area Manager, shall ensure that employees read and understand their post orders upon assuming their post.

(Authority cited: PC, Sections 5054 and 5058. Reference: DOM, Section 51040.6.1.)

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that unit supervisors ensure that custodial staff assigned to the Ad Seg units read and understand their post order upon assuming their post.

b. At a minimum of once each month, supervisors shall inspect the post orders and sign the CDC 1860. Any torn or missing pages noted shall be replaced as soon as practical.

Findings

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that the custodial supervisors assigned to the Ad Seg units inspect the CDC 1860 on a monthly basis.

c. A CDC 1860 shall be attached to each post order and shall be utilized to verify that the assigned staff member has read and understood the post orders for their post. CDC 1860s shall be kept for a period of one year from the date of last entry unless deemed evidentiary (then retained until no longer needed).

(Authority cited: PC, Sections 5054 and 5058. Reference DOM, Section 51040.6.2.)

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that PBSP utilizes a CDC 1860 to allow the staff member to verify, by signature, that they have read and understand the order for the post and this is to be countersigned by the supervisor. Each (100 percent) of the 75 post orders reviewed contained the current acknowledgment sheet.

- 7. **Protective Vests.** All CDCR employees, regardless of personnel classification, entering a Security Housing Unit, Special Management Program, ASU, Temporary Detention Unit, Condemned Housing Unit, Psychiatric Services Unit, or Special Behavioral Treatment Program, shall wear a Stab Resistant Vest when the employee is:
 - In direct contact with inmates/wards/patients within the aforementioned units (unrestrained or restrained).
 - Escorting inmates/wards/patients housed within the aforementioned units anywhere on institution grounds.
 - On the aforementioned unit tiers.

(Authority cited: DOM, Section 33020.16.2.)

Findings

COMPLIANCE

The CPRB toured PBSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that all staff wear a protective vest while in the Ad Seg units.

Review of Administrative Segregation and Due Process

Pelican Bay State Prison

GLOSSARY

AB	Administrative Bulletin	
Ad Seg	Administrative Segregation	
AOD	Administrative Officer of the Day	
ASU		
CPRB Compliance/Peer Review Branch		
CC Correctional Counselor		
CCR	California Code of Regulations	
CDCR	California Department of Corrections and Rehabilitation	
CDC 114 Isolation Log Book		
CDC 114-A	Inmate Daily Segregation Record	
CDC 114-A1	Inmate Segregation Profile	
CDC 128-B	Informational Chrono	
CDC 114-D Administrative Segregation Unit Placement Notice		
CDC 128-G Classification Chrono Form		
CDC 1030	Confidential Information Disclosure	
CDC 1860	Post Order Acknowledgment Sheet	
CPRB	Compliance/Peer Review Branch	
CSR Classification Staff Representative		
DOM	Department Operations Manual	
DS 5003	Fire Drill Report	
IB	Informational Bulletin	
ICC	Institution Classification Committee	
IE	Investigative Employee	
OC	Oleoresin Capsicum	
PC	California Penal Code	
SA	Staff Assistant	
SHU	Security Housing Unit	
PBSP	Pelican Bay State Prison	

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION OFFICE OF AUDITS AND COMPLIANCE

REPORT OF FINDINGS AND RECOMMENDATIONS

BUSINESS SERVICES

PELICAN BAY STATE PRISON

APRIL 15 - APRIL 24, 2008

PRELIMINARY

CONDUCTED BY

THE AUDITS BRANCH



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OFFICE OF AUDITS AND COMPLIANCE AUDITS BRANCH

PELICAN BAY STATE PRISON

INTRODUCTION

The California Department of Corrections and Rehabilitation's (CDCR), Office of Audits and Compliance (OAC), Audits Branch conducted an audit of Business Services at Pelican Bay State Prison (PBSP). The purpose of the audit was to analyze and evaluate the level of compliance with State and departmental policies, procedures, rules, regulations, operational objectives, and guidelines. The following areas were audited:

- Personnel Transactions;
- Delegating Testing;
- Payroll/Accounting;
- Position Control:
- Procurement (i.e., Service and Expense Orders/Direct Pay);
- Materials Management (i.e., Warehousing and Inventory Control);
- Plant Operations;
- Food Services;
- Inmate Trust Accounting;
- Environmental Health and Safety; and
- Occupational Health and Safety.

The fieldwork was performed during the period of April 15 through April 24, 2008. The exit conference was held on April 24, 2008.

René Francis, Certified Government Financial Manager, supervised the audit. Management Auditors Annette Sierra, Annecia Coleman, Michael Robinson, Deborah Brannon and Naomi Banks conducted the audit. In addition, Shirley Cowley, Hazardous Materials Specialist, California Rehabilitation Center, Marshall Fechner, Correctional Plant Supervisor, Correctional Facility, Corcoran State Prison and Mark Howard, Assistant Correctional Food Manager, Correctional Facility, Kern Valley State Prison provided subject matter expertise. Patricia Weatherspoon, Senior Management Auditor provided second line supervision and review. Richard C. Krupp, Assistant Secretary of the OAC, provided executive management oversight.

The audit consisted of an entrance conference, review of the prior reports, test of transactions, interviews, observations, periodic management briefings, an exit conference, and issuance of the preliminary audit report.

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OFFICE OF AUDITS AND COMPLIANCE AUDITS BRANCH

PELICAN BAY STATE PRISON

AUDIT SCOPE

The scope of the audit encompasses the examination and evaluation of the adequacy and effectiveness of ISP's system of management control and compliance to applicable policies, procedures, rules, and regulations. The audit period may include prior fiscal years if deemed necessary. The control objectives include, but are not limited to the following:

- State assets are safeguarded from unauthorized use or disposition;
- Transactions are executed in accordance to management's authorizations;
- Transactions are executed in accordance with applicable rules and regulations;
- Transactions are recorded correctly to permit the preparation of financial and management reports; and
- Programs are working efficiently and effectively.

In order to determine the adequacy of the control systems and level of compliance with State, federal, and departmental fiscal procedures, the audit team performed the following audit procedures:

- Examined evidence on a test basis supporting management's assertions;
- Performed detailed analyses of documentation and transactions:
- Interviewed Facility staff;
- Made inspections and observations;
- Performed group discussions of the overall impact of deficiencies; and
- Discussed deficiencies with supervisors and management throughout the audit process.

SYMPTOMS OF CONTROL DEFICIENCIES

Experience has indicated that the existence of one or more of the following danger signals will usually be indicative of a poorly maintained or vulnerable control system. These symptoms may apply to the organization as a whole or to individual units or activities. Department heads and managers should identify and make the necessary corrections when warned by any of the danger signals listed below:

- Policy and procedural or operational manuals are either not currently maintained or are nonexistent;
- Lines of organizational authority and responsibility are not clearly articulated or are nonexistent;
- Financial and operational reporting is not timely and is not used as an effective management tool;
- Line supervisors ignore or do not adequately monitor control compliance;
- No procedures are established to assure that controls in all areas of operation are evaluated on a reasonable and timely basis;
- Internal control weaknesses detected are not acted upon in a timely fashion; and
- Controls and/or control evaluations bear little relationship to organizational exposure to risk of loss or resources.

OFFICE OF AUDITS AND COMPLIANCE AUDITS BRANCH

PELICAN BAY STATE PRISON

CORRECTIVE ACTION PLAN

PBSP's corrective action plan (CAP) is due within 30 days of receipt of the preliminary audit report. See Attachment A for a sample of the format.

The CAP is designed to document the institution's plan to fully resolve the audit findings. It includes a brief description of the audit finding, the classification of the personnel directly responsible for resolving the finding(s), their telephone number and/or extension, a brief description of the proposed action and the anticipated date of completion.

Please e-mail your completed CAP to <u>Alberto.Caton@cdcr.ca.gov</u> and <u>Rose.Mitjans@cdcr.ca.gov</u>. Send the original to Alberto Caton, (AB), PO Box 942883, Sacramento, CA 95811-7243.

If you need additional time to prepare your CAP, please contact René Francis, Staff Management Auditor, at (916) 358-2070 or Patricia Weatherspoon, Senior Management Auditor at (916) 358-1801.

OFFICE OF AUDITS AND COMPLIANCE AUDITS BRANCH

PELICAN BAY STATE PRISON

EXECUTIVE SUMMARY

The Audits Branch conducted an audit of the Business Services Operations at PBSP from April 15 through April 24, 2008. The purpose of the audit was to determine the level of compliance with State, federal, and departmental rules, regulations, policies, and procedures. Prior to this audit the AB conducted an audit from September 15, 2003 through October 10, 2003. Unresolved findings are identified in this report as "Prior Finding".

The exit conference was held on April 24, 2008. The Audits Branch requested that PBSP provide a CAP within 30 days of receipt of the preliminary audit report.

Areas audited:

- Personnel Transactions;
- Classification and Pay;
- Delegated Testing;
- Payroll/Accounting;
- Position Control:
- Procurement (i.e., Service and Expense Orders/Direct Pay);
- Materials Management (i.e., Warehousing and Inventory Control);
- Plant Operations;
- Food Services;
- Inmate Trust Accounting;
- Environmental Health and Safety; and
- Occupational Health and Safety.

Twenty - five findings are identified in the preliminary audit report, categorized under the following topics:

Category	Number of Findings	Page Number
Administrative Concerns	2	1
Policies and Procedures	3	2
Health and Safety	7	2
Internal Control	1	7
Late Detection and Additional Workload	11	8
Training	1	13
Total	25	

This executive summary provides the category, a brief description of the finding which cites the policy violated, and prior finding, if applicable.

It should be noted that turnover in the area of Business Services over the past 12 months is as follows: Accounting 27 percent, Procurement 14 percent, Plant Operations 9 percent, Personnel 16 percent, and Food Services 20 percent.

I. ADMINISTRATIVE CONCERNS

A. Personnel

PBSP is hiring over their budgeted authority. This violates State Administrative Manual (SAM), Section 8531. For example, there are ten positions paid out of the 918 blanket when there are no vacant positions or anticipated vacancies in the future according to the vacancy report. The positions are two Correctional Counselor II's (Specialist), a Correctional Captain, an Electronic Technician, two Painter II's (CF), one Staff Services Analyst (General), one Library Technician, one Office Assistant (General) (who is on a Training and Development assignment), and a Supervising Correctional Cook.

Impact: This practice results in over expenditure of the budget authority by \$307,576.00.

Probation Reports and Individual Development Plans (IDP) are not prepared by supervisors for employees under their supervision as required by the Personnel Transaction Manual (PTM), Section 900.1. According to the 120 day delinquent notice provided by personnel, there are 465 reports/plans that are overdue for the period of September 2007 through February 2008.

Impact: Employees may not be aware of their job performance and work expectations.

II. POLICIES PROCEDURES AND PLANS

A. Plant Operations

The Plant Operations Procedures Manual (POPM) is not complete in accordance to Department Operations Manual (DOM), Article 6 and SAM Section 20050. For example, it is missing training plans, emergency plans, work schedules, respiratory protection, confined space and several other policies and/or procedures related to Plant Operations activities.

Impact: This issue could result in difficulty complying with policies and procedures, training and efficiencies.

B. Operational Procedures

Operational Procedures (OP) are not always reviewed on an annual basis. Of the 14 OP's reviewed ten are out of date. SAM, Section 20500

Impact: Employees may not comply with current policies and procedures.

C. Exposure Control Plan

III. HEALTH AND SAFETY

A. Environmental Health and Safety

Inspections were performed in 11 areas throughout the institution related to the Hazardous Communication Program. They included housing units, Prison Industry Authority (PIA), maintenance, vocational shop, and others. In general, we found deficiencies related to the Material Safety Data Sheet (MSDS) program, perpetual inventories of chemicals and signage. California Code of Regulations (CCR), Title 8, Section 5194.

Impact: This issue could result in an increased threat to life, health and safety and late detection of missing chemicals.

Accumulation start dates are missing on four drums at the Hazardous Waste Storage Site and on spent lead batteries at the Motor Pool, CCR, Title 22 and DOM, Section 52030.

Impact: Results in difficulties determining the accumulation start dates and possible fines and penalties.

B. Occupational Health and Safety

The written site specific Exposure Control Plan (ECP) has not been reviewed and/or updated since 2003 which is not in compliance with the Division of Correctional Health Care Services (DCHCS) guidelines. The plan requires annual updates.

Impact: The plan may not reflect changes and/or updates related to the locations of personal protective equipment as well as infection control practices and post exposure providers.

PBSP's Exposure Control Committee has not convened and met in accordance to the DHCS guidelines.

Impact: Staff is in jeopardy of coming in contact with hazardous substances that may transmit diseases.

The Injury Illness and Prevention Program (IIPP) is not complete and updated in compliance with the CCR, Title 8, Section 3203. Additionally, there are multiple versions. This was determined by review of the IIPP's maintained by the Accounting Office, Personnel Office, Plant Operations, and the Entrance building. **Impact:** Duties may not be performed in a safe and healthy manner.

C. Food Services

Cleaning schedules do not exist in all areas of the Central kitchen as required by the California Retail Food Code (CRFC), Section 114117. For example, cleaning schedules were non existent in the production and distribution areas.

Impact: Difficult to determine if inspections have been performed, (i.e., no proof of practice).

The truck used for food deliveries within the institution is not cleaned and sanitized on a daily basis as required by CRFC, Section 113980.

Impact: This condition could result in cross contamination, and food borne illness, from unsanitary conditions.

IV. INTERNAL CONTROL

A. Inmate Trust Accounting

Separations of duties are inadequate over securities. One person controls all aspects of securities from receipt to disposition. This is not in accordance with SAM, Section 20050.

Impact: This issue could result in late detection of errors, irregularities, theft and/or misappropriation.

V. LATE DETECTION AND ADDITIONAL WORKLOAD

A. Personnel

There are 30 salary advances outstanding over 90 days in which 28 have had no action taken towards resolution as required by SAM, Section 8595. They total \$36.219.73.

Impact: This issue results in difficulty clearing aged advances, creates additional workload for personnel and gives the appearance of an interest free loan.

There are 98 AR's outstanding over 90 days in which 49 have had no action taken towards resolution as required by Accounting Instructional Memorandum (AIM) 99-09. The 49 AR's total \$15,735.32. This condition is based on the review of the Monarch Report provided by the Regional Accounting Office (RAO), dated March 6, 2008.

Impact: Results in difficulty collecting money owed to the State, gives the appearance of an interest free loan, creates additional workload and may be a hardship to the employee when collection efforts begin.

Bilingual Pay request forms, Std. 897 are not always complete. This is noted on four of the five Std. 897's reviewed. Additionally, proof of passing the bilingual examination, duty statement and the organizational charts were not attached to the Std. 897's as required by the Personnel Services Manual, Section 230.6 and 230.7 and the California State Civil Service Pay Scale (CSCSPS), Section 14.

Impact: The Department of Personnel Administration (DPA) could retract the current delegation if policies are not followed.

There are deficiencies related to processing Request for Personnel Actions CDC 647 which may not meet the requirement of DPA Classification Pay Guidelines. Of the 224 CDC 647's processed in 2007, approximately 37 were reviewed for completeness. The following was noted, limited term appointments did not have justifications attached, extensions were not always adequately justified, industrial appointments did not have the Essential Functions Questionnaire, Std. 910 completed, no justifications were prepared for placing employees in a blanket, and six appointments were made to classifications that required the Office of Personnel Services approval.

Impact: These issues can cause excessive budget expenditures and can be construed as list circumvention.

There are deficiencies related to out-of-class (OOC) assignments. For example, there was no DPA approval for an out-of-class assignment over 120 days, many assignments are missing the bargain unit identification, organizational charts are not signed, and recruitment was not done when extending an out-of-class assignment when the incumbent was out due to illness.

Impact: This issue could result in the delegation being revoked by DPA.

B. Plant Operations

The Plant Operations Maintenance Report (POM) does not accurately reflect plant operations activities as required by DOM, Section 11010.12.4.4. For example, total hours are understated by 3000 hours during for the period of October 2007 – March 2008. The POM is not reviewed by the Warden. Additionally, there are 4500 hours of overtime at a cost of \$184,365.88 that is not captured.

Impact: Inaccurate reports are provided to management for decision making.

Trades staff is not preparing Equipment Maintenance Data Summary Sheets when a new piece of equipment is installed, such as ovens, water heaters, dish washing machines and steam kettles as required by DPOMPM, Section 2.D.5 and SAPMS Guidelines.

Impact: This issue results in equipment not tagged, inaccurate reports and inventories, and the inability to update the database.

There are deficiencies related to the work order process. For example, the Work Order Request (CDC 1064) is used but incompatible with the Facility Center Database, demand work orders do not denote actions taken or asset numbers,

work order priorities may not be established according to departmental guidelines and set by managers/supervisors. This practice may not comply with the requirements of PBSP OP number 57 or Standard Automated Preventive Maintenance System (SAPMS) guidelines. (Prior finding).

Impact: Results in incompatibility with SAPMS, difficulty determining task performed and asset number.

Following are deficiencies regarding the cross-connection (i.e., Backflow Prevention) which may not meet the requirements of the Department of Health Services (DHS) and California Plumbing Code (CPC) 603.3.2.:

- There is no master listing which identifies the location, serial numbers, manufacturer, and the number of backflow devices that are to be tested annually.
- It could not be determined if completion dates input into the SAPMS database reconciles to the date the test is performed.
- It could not be determined if all locations identified in the SAPMS database reconciles to the source document (i.e., field test) to where the device is located.
- It could not be determined if all backflow tests are input in the SAPMS data base.

Impact: Results in difficulty determining whether backflow tests have been performed.

C. Inmate Trust Accounting

There are 60 outstanding checks over one year old that have not been cancelled as required by SAM. Section 8042.

Impact: Results in difficulty determining if checks are cleared and reconciled to accounts, as well as, loss of interest income.

D. Food Services

The CDCR 1697's (Inmate Timecards) is not always completed properly in the Central Kitchen as required by Inmate Work/Training Incentive Program (IW/TIP) Handbook, Feb. 2005, page 12. For example, "S" time is not documented, CDCR 1697's are not signed, transfer in/out dates and daily movement sheet (DMS) numbers may be missing, etc.

Impact: Results in errors calculating inmate pay as well as difficulty accounting for an inmate's whereabouts in the event of an emergency.

Frozen food items are not dated when received as required by DOM, Section 22030.11.6.

Impact: Makes it difficult to use the first-in, first-out method of inventory control.

VI. <u>Training</u>

Hazardous Material Handling training is not completed on an annual basis. **Impact:** This condition could result in an increased threat to life, health and safety. In addition, this condition may result in fines and/or fees.

FINDINGS AND RECOMMENDATIONS

I. ADMINISTRATIVE CONCERNS

A. Personnel

1. Hiring Over Budget

PBSP is hiring over there budget authority. For example, there are ten positions in the 918 blanket and the institution has no vacant positions currently or any in the future to place them in. The positions are two Correctional Counselor II's (Specialist), a Correctional Captain, an Electronic Technician, two Painter II's, one Staff Services Analyst (General), one Library Technician, one Office Assistant (General) who is on a Training and Development assignment, and a Supervising Correctional Cook.

This practice over expends the budget authority by \$307,576.00.

SAM, Section, 8531, Established Positions, states, "No employee may be appointed except to a position which has been properly established and approved by the Department of Finance to fix its class title, duration, organizational function, and the budget allotment from which the salary is payable."

Recommendation

Review the current number of positions in the 918 blanket and the likelihood of vacant positions to move these positions into and in the future develop a plan to comply with the requirements of SAM Section 8531.

2. Performance Reports

Probation Reports and IDP's are not processed in a timely manner by supervisors for employees under their supervision. There are 465 reports that are overdue for the period of September 2007 through February 2008. The personnel office is distributing an "IDL/PRR 120 day Delinquent Notice" list to management.

This condition results in employees unaware of their job performance and or work expectations.

Personnel Transactions Manual (PTM), Section Agency Responsibility, Section 900.1, states in part, "...each State agency is responsible for the administration of the performance appraisal program for permanent and probation employee. The success of programs will depend largely on the effectiveness of training provided in the agency for employees, supervisors, and management at all

levels. Each agency shall adopt a system of performance appraisals in accordance with the rules of the State Personnel Board."

Recommendation

Establish a procedure that ensures performance reports and IDP's are completed timely and monitored for compliance.

II. POLICIES AND PROCEDURES

A. Plant Operations

1. POPM

The POPM is not maintained. Therefore, it does not promulgate current and/or applicable OP's and DOM supplements relative to the daily operations of Plant Operations. The AB noted the following missing policies and or procedures:

- Training plans;
- Emergency plans;
- Section 6/Construction Activities;
- Work schedules:
- Communications-memo's;
- Facility /Space Management (plot plans);
- Respiratory protection;
- Confined space;
- Hazardous materials handling; and
- Inmate work/Training Incentive Program (IW/TIP.)

DOM, Article 6, Section 1200, states in part, "regulations, manuals, and bulletins are utilized to transmit departmental directives and establishes procedures for their promulgation, distribution and maintenance." SAM, Section, 20050, states in part, "Experience has indicated that the existence of the following danger signal will usually indicate a poorly maintained and vulnerable control system . . . Policy and procedural or operational manuals are either not currently maintained or are non-existent".

This condition results in difficulty identifying current policies and procedures which could make training and compliance difficult.

Recommendation

Review the current POPM, and update as necessary to ensure that the POPM promulgates current policies and procedures.

B. Operational Procedures

OPs are not always reviewed on an annual basis. Of the 14 OPs reviewed ten are out of date.

This issue results in difficulty complying with current policies and procedures.

SAM, Section 20500, Internal Control, states in part, "... Experience has indicated that the existence of one or more of the following danger signals will usually be indicative of a poorly maintained or vulnerable control system...1. Policy and procedural or operational manuals are either not currently maintained or are nonexistent...."

Recommendation

Review OPs and update as necessary.

III. HEALTH AND SAFETY

A. Environmental Health and Safety

1. Hazardous Communication Program

Inspections were performed at 11 areas throughout the institution regarding the Hazardous Communication Program. In general, the MSDS program is not user friendly and perpetual inventories were missing and/or incomplete and secondary labels on containers were incomplete. Specific deficiencies by location are as follows:

A-Yard Housing Unit (3):

The MSDS Binder not user friendly, secondary labels incomplete.

Optical/PIA:

Daily/perpetual inventory of chemicals is needed.

Laundry:

Daily/perpetual inventory of chemicals is needed and the MSDS Binder is not user friendly.

A- Maintenance Refrigeration:

The MSDS Binder is not user friendly and a perpetual inventory of chemicals is needed.

A- Building Maintenance:

Daily/perpetual inventory of chemicals is needed and the MSDS Binder not user friendly.

A-Engineer Shop:

Indexing of MSDS binder is missing and the MSDS Binder is not user friendly.

Vocational Auto Body:

Indexing of MSDS binder is missing and the MSDS Binder is not user friendly.

Medical Supply:

The MSDS binder is missing and Daily/perpetual inventory of chemicals is needed.

Level One Medical & Dental:

Signs are missing on chemical storage areas.

Motor Pool:

Perpetual inventory of chemicals is needed.

This condition results in an increased threat to life, health and safety and late detection of missing chemicals.

The CCR, Title 8, Section 5194, Hazard Communication Program, states in part "Department heads shall monitor daily compliance with this procedure in the areas of their responsibility. Each area supervisor shall ensure that every person required to work with or use hazardous, toxic, volatile substances is appropriately trained...." DOM, Section 52030.2, states in part, "This procedure shall establish a method for the identification, receipt, training, issue, handling (or use), inventory and disposal of hazardous substances, which is in compliance with all federal, state and local laws or ordinances...." DOM, Section 52030.4.1, states in part "...Maintain a constant daily inventory of all hazardous substances used or stored...."

Recommendation

Adhere and comply with the Hazardous Communication Program. Specifically, review MSDS binders and conduct daily inventories of chemicals.

2. Hazardous Waste Storage

Accumulation start dates are missing on four drums located at the Hazardous Waste Storage Site and accumulation dates are missing on spent lead batteries at the Motor Pool.

This condition results in difficulties determining the length of time hazardous waste is stored and fines and could result in penalties.

The CCR, Title 22, Section 66262.34(b) (2), states in part, "...The first day the generator begins accumulating any hazardous waste, accumulation start date begins...." Management of Hazardous Waste in DOM, Section 52030.

Recommendation

Adhere and comply with CCR, Title 22, Hazardous Waste Regulations and the DOM, Section 52030, Control of Dangerous and Toxic Substances. Specifically, identify accumulation start daters on hazardous waste.

B. Occupational Health and Safety

1. Exposure Control Plan

PBSP written site specific Exposure Control Plan (ECP) has not been reviewed and or updated since 2003. The updates should include but be not limited to:

- The post exposure providers for staff at PBSP.
- The locations of Personal Protective Equipment (PPE).
- Infection control practices and or policy /procedures for soiled linen.
- Infection control practices and or the policy /procedures regarding Methyl Resistant Staphylococcus (MRSA) and Norwalk virus (Noro virus).

This condition could result in staff not being aware of current infections control practices and being in jeopardy of coming in contact with hazardous substances that may transmit diseases.

DCHCS, Blood Borne Pathogens, (BBP) and Exposure Control Program (ECP), REVIEW AND UPDATE OF THE EXPOSURE CONTROL PLAN, states "The department recognizes the importance of keeping the ECP up-to-date. This will be the responsibility of the Exposure Control Facilitator (ECF) and the Exposure Control Committee (ECC). All proposed changes shall be submitted to the Public Health Section (PHS) for review and approval. The PHS is responsible for providing updates and revisions as necessary. The ECP shall be reviewed and updated under the following circumstances:

- A. Annually:
- **B.** When new or modified task and procedures are implemented;
- **C.** When new and functional positions or job classifications within the institution or division are established, which may involve possible exposure to BBP;
- D. On a regular basis to review engineering and work practices controls their regularly scheduled maintenance logs, and to update them to ensure their effectiveness;
- **E.** In response to data gathered since the last update regarding exposure incidents documented on the sharps injury log;
- **F.** In response to any information received regarding possible deficiencies or needed improvements; and
- **G.** To assess progress made in environmental controls for the purpose of decreasing risk to BBP.

Recommendation

Review the 2003 version of the ECP and update as necessary to ensure compliance with the DCHCS BBP ECP.

2. Exposure Control Committee Meetings

PBSP's Exposure Control Committee has not convened and met in accordance to the DCHCS guidelines.

This condition could results in staff coming in contact with hazardous substances that may transmit diseases.

DCHCS, Blood Borne Pathogens, (BBP) and ECP. REVIEW AND UPDATE OF THE EXPOSURE CONTROL PLAN, states "The department recognizes the importance of keeping the ECP up-to-date. This will be the responsibility of the Exposure Control Facilitator (ECF) and the Exposure Control Committee (ECC). Exposure Control Committee: This committee, with its appointed chair(s), will review the contents of the ECP and establish the specifics of its function throughout the institution. In some institutions, this committee's function is combined with other similar committees, but its functional presence is legally mandated by the California Code of Regulations (CCR), Title 8, General Industry Safety Orders, Article 100, Section 3203, (see Chapter 9, Appendix, page I.App.2). The ECC must include the Warden of the institution or their designee: the CMO or their designee; a representative from the Union of American Physicians and Dentists (Unit 16), the California Correctional Peace Officers Association (Unit 6), the Health and Safety Office, and other interested staff as may be deemed appropriate. Meeting Frequency: The committee will meet no less than quarterly, and more often as may be indicated by circumstances of employee BBP exposures."

Recommendation

Meet and convene quarterly in accordance to the DCHCS guidelines.

3. Injury and Illness Prevention Program

Record keeping regarding the IIPP is inadequate. The AB could not locate a complete completed and updated IIPP inclusive of health and safety policies and procedures with codes of safe practices and hazard evaluations. The areas of review were accounting, personnel, plant operations and the entrance building.

This condition may result in duties not being performed in a safe and healthy manner.

PBSP, IIPP, Section IX, states that Documents related to the IIPP are maintained by the Safety Officer, Supervisor, RTWC, and IST. CCR, Title 8, Section 3203, states in part, "...management is responsible for ensuring that all safety and health policies and procedures are clearly communicated and understood by all employees...Every California employer must establish, implement and maintain a written Injury and Illness Prevention (IIP) Program and a copy must be maintained at each workplace or at a central worksite if the employer has non-fixed worksites. The requirements for establishing, implementing and maintaining an effective written injury and illness prevention program are contained in Title 8 of the California Code of Regulations, Section 3203 (T8 CCR 3203) and consist of the following eight elements:

Responsibility
Compliance
Communication
Hazard Assessment
Accident/Exposure Investigation
Hazard Correction
Training and Instruction
Recordkeeping...."

Recommendation

Establish and maintain complete and current IIPP in accordance with the CCR, Title 8, Section 3203.

C. Food Services

1. Cleaning Schedules

Cleaning schedules do not exist in all areas of the Central kitchen. We noted that the production and distribution areas did not have cleaning schedules.

These conditions may result in difficulty establishing routine cleaning assignments and unsanitary conditions.

The CRFC, Section 114117, states, "(d) Surfaces of utensils and equipment containing potentially hazardous food may be cleaned less frequently than every four hours if any of he following occurs: (6) The cleaning schedule is approved based on consideration of characteristics of the equipment and its use..."

Recommendation

Ensure that every area within Food Services has and adheres to a cleaning schedule.

2. Truck Sanitation

The truck used for food deliveries within the institution is not cleaned and sanitized on a daily basis.

This condition may result in food contamination and food bourn illness due to unsanitary conditions.

The CRFC, Section 113980, states, "All food shall be...transported...so as to be pure and free from adulteration and spoilage; shall be protected from dirt, vermin, unnecessary handling, droplet contamination, overhead leakage, or other environmental sources of contamination...."

Recommendation

Ensure the food delivery vehicle is cleaned and sanitized on a daily basis.

IV. <u>INTERNAL CONTROL</u>

A. Inmate Trust Accounting

Separation of Duties is inadequate over securities. One person has significant control by performing all aspects of securities from receipt to disposition.

This issue could result in late detection of errors, irregularities, theft and/or misappropriation.

SAM, Section 20500, Internal Control, states in part, "...elements of a satisfactory system of internal accounting and administrative controls, shall include, but are not limited to: 1. A plan of organization that provides segregation of duties appropriate for proper safeguarding of state assets...3. A system of authorization and record keeping procedures adequate to provide effective accounting control over assets, liabilities, revenues and expenditures...."

V. LATE DETECTION AND ADDITIONAL WORKLOAD

A. Personnel

1. Salary Advances

Thirty salary advances outstanding over 90 days were reviewed. Twenty-eight have had no action taken towards collection. They total \$36,219.73.

This condition results in difficulty clearing aged advances, creates additional workload for personnel and gives the appearance of an interest free loan.

SAM, Section 8595, Revolving Fund Advances, states, "Normally agencies will make revolving fund payments to employees for salary earned only when (1) there have been error or delays in submitting or processing documents making it impossible for the State Controller's Office to prepare and deliver proper salary warrants within a reasonable time,...." SAM, Section 8776.7, Employee Accounts Receivable, states, "Departments will notify employees (in writing) of overpayments and provide them an opportunity to respond...."

Recommendation

Initiate clearance of old salary advances and ensure salary advances are cleared timely. Also, monitor the process for compliance.

2. Accounts Receivables

A review of the Monarch Report from the RAO, dated March 6, 2008, reveals that 49 of the 98 AR's outstanding over 90 days have had no action taken towards collection. The 49 AR's total \$15,735.32.

This condition results in difficulty collecting money owed to the State, gives the appearance of an interest free loan, creates additional workload and may be a hardship to the employee when collection efforts begin.

AIM 99-09, Accounts Receivable Process, Section A, states in part, "...the employees must repay any overpayment, to employers...." SAM, Section 8776.7, states in part, "...Departments will notify employees (in writing) of overpayments and provide them an opportunity to respond...."

Recommendation

Initiate clearance of old AR's and ensure AR's are cleared timely. Also, monitor the process for compliance.

3. Bilingual Pay Request

Bilingual Pay request forms, STD 897, were submitted for four Correctional Officers (CO's) and one Office Assistant (Typing) (OA). All four CO request forms were incomplete (i.e. entries in Sections 16A through J, and one was missing Section 15B); the OA's request form was complete, but backdated more than the approved 60 days authorized. Proof of passing the bilingual examination in December 2007 duty statement and organizational chart were not attached to any of the five requests. The Bilingual Coordinator is new.

This issue results in possible retraction of delegation by the Department of Personnel Administration (DPA) if policies are not followed.

Reference the CSCSPS, Section 14, Pay Differential and the Personnel Services Manual, Section 230.6 and 230.7 for specific policies related to processing bilingual pay.

Recommendation

Provide training and make corrections to the requests that were found to be in error.

4. Request for Personnel Action

Thirty-seven RPAs were reviewed and several deficiencies were noted. For example, limited term (LT) appointments did not have the justification attached to the RPA. Memorandums extending an employee's LT appointment did not have sufficient justification for the extension (i.e. was the extension for the employee or position; was the extension needed to continue filling behind someone who was out on leave. Industrial appointments (i.e. Office Technician, Personnel Specialist, etc.) did no have the STD 910, Essential Job Functions completed by the employee. Justification were not prepare prior to placing two employees in the blanket. Six appointments were made to classifications that required the Office of Personnel Services' approval.

This issue results in excessive budget expenditures by placing employees in the blanket, list circumvention (i.e. improper use of LT appointments) and lack of justification for personnel actions.

See the following criteria for specific policies related to RPA's, Office of Personnel Services, Personnel Services Manual Sections 200-20010 and he SPB, PMPPM Section 331

Recommendation

To prepare a check list of all items required for RPA's. Review all RPA's to ensure that all items noted on check list are activated and monitor for compliance.

5. Out-of-Class Assignments

Nineteen OOC assignments were randomly selected for review, based on extension requests. Of the 19 assignments reviewed, 1 BU 6 employee appears to have had multiple OOC assignments in the past year, having only a break in continuity due to vacation. Different reasons were given for his OOC assignments, but they were to the same position. Employees filling in behind the employee were extended based on the reasons the employee was given extensions. However the reason for his "vacancy" did not change and therefore, the position should not have been filled beyond 120 days without prior Department of Personnel Administration (DPA) approval. Many assignments were missing the bargaining unit identification (S, R, M, etc.) and the organizational charts need to be signed. There was no recruitment done when extending an OOC assignment when the incumbent is out due to illness.

This issue could result in employees compensated improperly and against Bargaining Unit Contract Provisions. Also, the delegations could be revoke by DPA.

See the following criteria for policies related to OOC: Personnel Management Manual Section 2304 and DPA Section 375. The delegation could be revoke by DPA. Reference the following policies.

Recommendation

Submit justification for extension request beyond 120 days as required by the DPA.

B. Plant Operations

1. POM Reports

POM reports are unreliable. The POM does not accurately reflect Plant Operations activities. During the period sampled, (i.e. October 2007-March 2008.) The AB noted the following deficiencies:

- The total hours used to maintain the physical plant is understated by over 3,000 hours. We noted over 50 percent of the trades classifications listed on the POM report are not meeting the total hours required for pay period.
- The POM report is not routed and reviewed by the Warden.
- Over 4500 hours of overtime at a cost of \$184,365.88 is not captured.
- Inmate time for labor is not captured.

This practice may result in inaccurate reports provided to institutional management and Central Office Maintenance Unit. In addition, information from the POM that is used for the COMSTAT report is inaccurate.

DOM, Section 11010.12.4.4, states in part, "Compile information for monthly reports as appropriate." SAPMS guidelines, state in part, "Routing copies of the report to the following: Warden, Correctional Administrator, Business Services, and Correctional Plant Manager."

Recommendation

Route, validate, and review reports for accuracy to determine that they accurately reflect Plant Operations activities.

2. Equipment Maintenance Data Summary Sheets

Trades staff is not preparing Equipment Maintenance Data Summary Sheets when a new piece of equipment is installed, such as ovens, water heaters and Dish washing machines and steam kettles. As a result, equipment/assets are not clearly identified with the standard equipment code on each piece of equipment (SAPMS tags). The AB noted that 15 percent of equipment tested did not have identifiers; this condition was noted in Food Services. Also, Preventive Maintenance (PM) schedules are not established for new equipment.

This condition results in not identifying assets. In addition, this issue may cause reports and inventories to become inaccurate and diminish the accuracy and updating of the database. Equipment is not tagged and PM schedules are not established.

DPOMPM, Section 2.D.5 and SAPMS guidelines, states, "All equipment will be clearly identified by placing the unique standard equipment code on each piece of equipment . . . Transfer equipment data from the Equipment Maintenance Summary Data Sheets following the guidelines in the Departmental Standard Plant Operations Maintenance Procedures Manual and develop assignment schedules for the completion of the PM"

Recommendation

Prepare Equipment Maintenance Summary Data Sheets and forward to the SAPMS administrator timely to place newly purchased equipment on a PM schedule. Tag equipment in accordance to the DPOMPM.

3. Work Order Request (Prior Findings)

The CDC 1064 (Work Order Request) is incompatible with the Facility Center database; it does not contain an area to place an asset number which is used for maintaining, tracking and monitoring maintenance and historical data. In addition, the AB noted other deficiencies regarding the work order process:

- Demand work orders do not denote actions taken.
- Work orders do not display the asset number.
- Work order priorities are not set by managers/supervisors and at times, there was no priority given on the work request.
- Departmental guidelines are not used for setting work order priorities.
- Work request (i.e. the generating document) is used as the source document for the work order.

This condition results in incompatibility with SAPMS, difficulty determining actual cost, tasked performed, who, when and how long it took to perform a task.

SAPMS guidelines, Departmental Plant Operations Maintenance Procedures Manual (DPOMPM) and PBSP OP number 57, states, "Approved work request will be routed to Plant Operations work order desk and a computerized work order will be prepared."

Recommendation

Ensure that work orders are reviewed by supervisors, fully completed, signed and dated. Use the Facility Center Data base as the primary vehicle for issuing work orders.

4. Backflow

On-site backflow prevention assembly-testers perform routine PM test of backflow devices installed throughout the facility. The AB noted the following deficiencies regarding the cross-connection program:

- There is no master listing which identifies the location, serial numbers, manufacturer, and the number of back flow devices that are to be tested annually.
- It could not be determined if completion dates input into the SAPMS database reconciles to the date the test is performed.
- It could not be determined if all locations identified in the SAPMS database reconciles to the source document (i.e., field test) and physical location of the device.
- It could not be determined if all backflow tests are input in the SAPMS data base.

This conditions result in difficulty determining whether backflow test have been performed.

CPC (CPC), Section 603.3.2, states in part, "The premise owner or responsible party shall have the backflow prevention assembly tested by a certified backflow assembly tester at the time of installation, repair, or relocation and at least on an annual schedule thereafter or more often when required. SAPMS guidelines and the PBSP OP number 34 states in part, "establish an effective and efficient (PM) procedure. This procedure must establish the systematic maintenance of all major institutional facilities and equipment." DHS, Drinking Water and Environmental Management Division recommends that test results should be kept on file in a central location.

Recommendation

Create a master listing or use plot plans to identify all locations and devices, maintain accurate data within the SAPMS and test backflows on an annual basis. Continuous education of staff should be encouraged.

C. Inmate Trust Accounting

1. Outstanding Checks

There are 60 outstanding checks over one year old that have not been cancelled.

This practice results in difficulty determining if checks are cleared and reconciled to accounts, as well as, loss of interest income.

SAM, Section 8042, states in part, "...trust fund checks have a one-year period of negotiability."

Recommendation

Clear outstanding checks on a monthly basis.

D. Food Services

1. Inmate Work Supervisor's Time Log

The CDCR 1697 is not always completed properly. The following deficiencies were noted in the Central Kitchen:

- There is no documentation for the use of "S" time.
- CDCR 1697s are not signed by supervisors.
- Some timekeeper signatures are missing.
- Transfer in dates and DMS numbers are missing.
- Entries are not made as events occur (i.e., time in).
- Some documentation was incomplete (i.e., whether minimum was met).

These conditions results in errors calculating inmate pay as well as difficulty accounting for an inmate's whereabouts in the event of an emergency.

PBSP IW/TIP Handbook, Feb. 2005, page 12, states in part, "It is imperative that the CDC 1697 be filled out every day at the start and end of each shift with the actual times that the inmate started and stopped work; page 12, 2A. All entries on the CDC 1697 must be made daily as they occur; page 13, 19. TIME IN: Enter the time (military time) that the inmate reports for work; page 14, 26. TIMEKEEPER'S SIGNATURE: Legibly sign your name here; 25. MINIMUM MET: Enter the letter "X" ("Y") for each day the inmate meets the minimum work hours required for the job assignment...."

Recommendation

Document inmate time worked as events occur. Ensure that all areas of the CDC 1697 are complete.

2. Dates on Food

Frozen food items are not dated when received as required by DOM, Section 22030.11.6.

This condition makes it difficult to use the first-in, first-out method of inventory control.

DOM, Section 22030.11.6, states in part, "...all materials in inventory shall be dated at the time of receipt. Items that carry an assigned shelf life require shelf rotation; first-in, first-out warehousing shall be used with these items...."

VI. TRAINING

A. Environmental Health and Safety

1. Hazardous Material Handling

Hazardous Material Handling training is not completed on an annual basis.

This condition could result in an increased threat to life, health and safety. In addition, this condition may result in fines and/or fees.

OP number 600, Section VI–C 1-9, Employee/Inmate Information and Training. Management of Hazardous Materials in DOM, Section 52030. The CCR, Title 8, Section 5194, Hazard Communication Program and DOM, Section 52030.4.1, states in part, "Department heads shall monitor daily compliance with this procedure in the areas of their responsibility...Each area supervisor shall ensure that every person required to work with or use hazardous, toxic, volatile substances is appropriately trained...."

Recommendation

Adhere and comply with the CCR, Title 8, Section 5194, Hazard Communication Program and DOM, Section 52030, Control of Dangerous and Toxic Substances.

OFFICE OF AUDITS AND COMPLIANCE AUDITS BRANCH

PELICAN BAY STATE PRISON

GLOSSARY

AB Audits Branch

AIM Accounting Instructional Memorandum

AR Accounts Receivable
CAP Corrective Action Plan

CCR California Code of Regulations

CDC 647 Personnel Action/Request for Admission

CDC 998-A Employee Attendance Record

CDC 1064 Work Order Request

CDC 1697 Inmate Work Supervisor's Time Log

CDCR California Department of Corrections and Rehabilitation

CPC California Plumbing Code
CRFC California Retail Food Code

CSCSPS California State Civil Service Pay Scale

DHCS Division of Health Care Services
DHS Department of Health Services

DIR Daily Inventory Record Daily Movement Sheet

DOM Department Operations Manual

DPA Department of Personnel Administration

DPOMPM Departmental Plant Operations Maintenance Procedures Manual

ECP Exposure Control Plan

FIM Financial Information Memorandum

FLSA Fair Labor Standards Act

GC Government Code
IB Informational Bulletin
IDL Inmate Day Laborer

IDP Individual Development Plans
IIPP Injury and Illness Prevention Plan

ITAOOG Inmate Trust Accounting Office Operational Guide

ITAS Inmate Trust Accounting System ITFM Inmate Trust Fund Manual

IW/TIP Inmate Work Training Incentive Program

ML Military Leave
MLD Military Leave Drill

MSDS Material Safety Data Sheet
OAC Office of Audits and Compliance

OP Operational Procedure
OPF Official Personnel File
PBSP Pelican Bay State Prison
Prison Industry Authority

POM Plant Operations Maintenance Report

POPM Plant Operations Procedures Manual

PPR Probation Report

PTM Personnel Transactions Manual
PPAS Personnel Post Assignment System

PPC Periodic Position Control
PPM Payroll Procedures Manual
PWS Prevailing Wage Sheets
RAO Regional Accounting Office
SAM State Administrative Manual

SAPMS Standard Automated Preventive Maintenance System

SLAMM State Logistics and Materials Management

Std. Form 115 Order for Storeroom SuppliesStd. Form 607 Change in Established Position

Std. 897 Bilingual Pay Request

Std. 910 Essential Functions Questionnaire

SAMPLE FORMAT CORRECTIVE ACTION PLAN							
Item #	Audit Finding	Responsible Personnel	Proposed Action	Date to be Completed			
A.1	WRITTEN NOTICE						
	Of the 30 records reviewed, 24 (80 percent) contained a clearly stated date and reasons for placement in part I, Notice of Reasons for Placement date. The remaining three records failed to clearly document the reason for placement in sufficient detail to enable the inmate to prepare a response or defense.	Facility Captain Do Not use individuals names and do Not use Acronyms.)	A. Facility Captains will ensure that each inmate placed in Administrative Segregation will have the placement date included on all CDC 114-Ds processed. B. Training will be provided by the Facility Captains to ensure sufficient information is documented in abundant detail in order for an inmate to articulate a response or defense	2/2/2006			

California Department of Corrections and Rehabilitation Office of Audits and Compliance Information Security Office



Information Security Review
Pelican Bay State Prison
April 15 through April 25, 2008

INFORMATION SECURITY OFFICER
Allen J. Pugnier

The Office of Audits and Compliance (OAC), Information Security Branch (ISB), conducted an Information Security Compliance Review of Pelican Bay State Prison (PBSP) between April 21, 2008 and April 25, 2008. The review covered 17 different areas. PBSP was fully compliant in 11 areas, partially compliant in 6 areas, and non-compliant in 0 areas. The overall score for the institution was ninety-three percent (93%). The chart below summarizes these outcomes.

FINDINGS SUMMARY:

		Score	Compliant	Partial Compliance	Non Compliant	
STAF	STAFF COMPUTING ENVIRONMENT					
1.	Use Agreement (Form 1857) is on file.	80%		PC		
2.	Annual Self-Certification of Information	100%	С			
	Security Awareness and Confidentiality					
	forms are on file.					
3.	Information security training is current.	100%	С			
4.	Staff log on using own password.	100%	С			
5.	Network access authorization is on file.	98%	С			
6.	Physical locations of CPUs agree to	96%	С			
	inventory records.					
7.	Staff CPUs labeled "No Inmate Access."	81%		PC		
8.	Staff monitors are not visible to inmates.	100%	С			
9.	Anti virus updates are current.	88%		PC		
10.	Security patches are current.	70%		PC		

INMA	INMATE COMPUTING ENVIRONMENT (Education, Library, Clerks)					
11.	Physical location of CPUs agree to	100%	С			
	inventory records					
12.	CPU labeled as inmate computer.	75%		PC		
13.	Anti virus updates are current.	NA ^[1]				
14.	Inmate monitors are visible to supervisor.	88%		PC		
15.	Portable media is controlled.	100%	С			
16.	Telecommunications access is restricted.	100%	С			
17.	Operating system access is restricted.	100%	С			
18.	Printer access is restricted.	100%	С			

Total of Tests	11	6	

Overall Percentage 93%

^[1] Scores for the Anti virus updates for the inmate computing environment could not be determined because of strict configuration restrictions on the workstations.

OBJECTIVES, SCOPE AND METHODOLOGY

The objectives of the Information Security Compliance Review were to:

- Assess compliance to selected information security requirements,
- Evaluate other conditions discovered during the course of fieldwork that may jeopardize the security of information assets of the facility or of the Department, and
- Provide information security training for management and staff.

The Information Security Branch (ISB) did not review any Prison Industry Authority computers.

In conducting the fieldwork the ISB performed the following procedures:

- Interviewed senior management, information technology staff, institutional staff, and computer users.
- Asked staff to provide evidence that all authorized computer users had Acceptable Use Agreement forms and appropriate training support documentation on file.
- Tested selected information security attributes of users and IT equipment using three different population samples. This included both the staff and inmate computing environments.
- Reviewed various laws, policies and procedures, and other criteria related to information security in the custody environment.
- Conducted physical inspection of selected computers.
- Observed the activities of the information technology support staff.
- Analyzed the information gathered through the above processes and formulated conclusions.

FINDINGS AND RECOMMENDATIONS

The ISB provided a copy of our review guide to your IT staff. It contains criteria and detailed methodology. That information, therefore, is not duplicated under each finding.

ISB's findings and recommendations are listed below. ISB staff discussed them with management in an exit conference following our fieldwork. Please contact us if you would like to discuss further any of these issues.

1. Computer Use Agreement Forms (Form 1857) are not on file for all computer users. (80% compliance)

Recommendation: Require all staff users to complete Form 1857 before being granted computer access. All Contractors, volunteers or visitors who use CDCR computers are required to complete a Form 1900 before being granted access. (DOM 48010.8, 48010.8.2)

Best Practice: All needed forms can be found on the CDCR Intranet page for the Information Security Office.

2. Staff monitors and computers are not correctly labeled, "No Inmate Access." (81% compliance)

Recommendation: Each computer in a facility shall be labeled to indicate whether or not inmate access is authorized. (Title 15 3041.3(d) and DOM 49020.18.3, 42020.6)

Best Practice: Affix appropriate labels to both the monitor and the CPU.

3. All staff computers do not have up-to-date antivirus software. (88% overall compliance).

Recommendation: Update antivirus software on all staff computers at least monthly. (DOM 48010.9)

4. All staff computers do not have up-to-date security patches. (70% overall compliance).

Recommendation: Update security patches on all staff computers. (DOM 48010.9)

5. Inmate computers are not labeled for inmate use only. (75% compliance)

Recommendation: Affix proper labels to all inmate monitors. (DOM 49020.18.3, 42020.6)

6. Inmate computer monitors are not visible to the supervisor (88% compliance)

Recommendation: The approved uses of workstations by inmates shall be carried out only under very tightly controlled circumstances. Inmates using computers must be under "direct and constant supervision." (DOM 49020.18.3)

Best Practice: Position all inmate monitors so that the supervisor can see the screen easily.

Other Observation(s):

A. Personal Thumb Drives

It was noted a large number of personally owned thumb drives were in use by staff.

Recommendation: Institution management should purchase thumb drives with encryption capability for staff requiring thumb drives for their work tasks.

Thumb drives should be controlled through the IT Coordinator's office.

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION OFFICE OF AUDITS AND COMPLIANCE

PROGRAM COMPLIANCE REVIEW

REPORT OF FINDINGS

EDUCATION COMPLIANCE

PELICAN BAY STATE PRISON APRIL 15 THROUGH APRIL 25, 2008



CONDUCTED BY

EDUCATIONAL COMPLIANCE BRANCH

OFFICE OF AUDITS AND COMPLIANCE

EDUCATION COMPLIANCE BRANCH REVIEW

Pelican Bay State Prison

April 21 through 24, 2008

TEAM MEMBERS:

Raul Romero, Associate Superintendent, OAC G. Lynn Hada, Principal, OAC Beverly Penland, Vocational Vice-Principal, OAC John Jackson, Academic Vice-Principal, OAC Christine Long, Principal Librarian (A), OCE Ron Callison, Vocational Vice-Principal, OCE-VTEA Mark Lechich, Academic Vice-Principal, OCE-WIA Gary Sutherland, Associate Superintendent, OCE-EOP

221 Areas Reviewed

CATEGORIES	PERCENTAGE OF COMPLIANCE			
Education Administration	46	÷64	=	72%
Academic Education	52	÷65	=	80%
Vocational Education	33	÷41	=	80%
Library/Law Library	16	÷29	_=	55%
Federal Programs	20	÷21	=	95%
Special Programs*	N/A			%
Total:	167	÷221	=	76%

Your corrective action plan (CAP) must address each of the <u>deficiencies</u> listed below. The CAP must be submitted to the Superintendent of the Office of Correctional Education for review and/or modification. The CAP then is due to the Office of Audits and Compliance (OAC) for review within 30 days after your receipt of the preliminary report from OAC.

Office of Audits and Compliance Educational Compliance Branch ADMINISTRATION SECTION

I. EDUCATION ADMINISTRATION:

72% COMPLIANCE

Deficiency:

#7 Is the school following the Education Hiring Steps and Responsibilities memo and matrix dated July 13, 2006 instructions when filling vacancies? The school does not follow all steps in the Education Hiring Matrix every time.

#10 Are all instructional and supervisory staff credentialed appropriately within subject matter area where they are assigned? One teacher is inappropriately assigned to an Elementary Teacher position number 2287. The teacher has a single subject credential only and must be assigned to a High School position number 2290. It is recommended the Principal or Vice-Principal contact Max Free at the Office of Correctional Education to determine if the 2287 position number is "interchangeable" and can be changed to a 2290 by the Institutional Personnel Officer.

#13 Does the institution have an Operational Procedure (OP) that addresses the legislative mandates of the Bridging Education Program? There is an Operational Procedure but it was last revised in January 2007.

#14 Does the institution have an Operational Procedure for the Education Program? Does it use Department Operation Manual Chapter 10 as an inclusion? The Operational Procedure was last revised in July 2005. It has no reference to the Department Operation Manual either Chapter 10 or Chapter 5. It only addresses Academic Education issues with no mention of Vocational Education. It also states that if a potential student has a General Educational Development certificate or a High School Diploma, then he cannot be enrolled in an academic (Adult Basic Education, General Education Development and High School) program, notwithstanding the student's Test of Basic Adult Education (TABE) scores.

#26 Is an approved Alternative Education Delivery Model Operational Procedure in place? The current Operational Procedure was last revised in March 2006.

#27 Are all of the Alternative Education Delivery Models being locally implemented at the institution in agreement with the California Correctional Peace Officers Association agreement and the institutional Operational Procedure? There is no Education/Work program as required by the Alternative Education Delivery Model Operational Procedure.

#28 Are all Alternative Education Delivery Model positions filled? There is no Education/Work program as required by the Alternative Education Delivery Model Operational Procedure.

Office of Audits and Compliance Educational Compliance Branch ADMINISTRATION SECTION

- #34 Are Certificates of Vocational or Academic Completion being issued to those students earning them and recorded on a tracking system? Are Certificates of Achievement issued to those students who exit the program before the completion certification is earned? Certificates of Achievement are sometimes issued to students that have not left the class; they are issued for finishing orientation or safety, for example.
- #37 Does all supervisory staff conduct and record classroom visitations and observations on a quarterly basis? Visitations and observations are done but are not being recorded.
- #38 Does the Academic Vice-Principal/Vocational Vice-Principal provide documented In-Service Training and On-the-Job Training? Have all currently due probationary and annual performance evaluations been completed? Almost all of the annual performance evaluations are one year or more overdue. In Service Training and On the Job Training are provided and documented.
- #39 Are supervisors documenting their contact with staff and inmates that are involved in the bridging program? Documentation of contacts between the supervisors and the Bridging Education Program inmates was not available.
- #54 Do the number of inmates being enrolled and the number completing Transforming Lives Network courses agree with the numbers reported to Office of Correctional Education? The Education Monthly Report reports zero. In-house reports show completion figures of 47 inmates.
- #55 Has Transforming Lives Network enrollment and completion data been tracked? The enrollment and completion data is not tracked appropriately.
- #56 Is there a High School credit program and General Education Development Testing program that follows Office of Correctional Education and State requirements? Are High School Diplomas and General Education Development Equivalency Certificates issued to qualified inmates? There is no High School program at PBSP.
- #57 Is there an Inmate Education Advisory Committee established with regularly scheduled monthly meetings? The Inmate Education Advisory Committee has met sporadically, not monthly except for the last two months, for the past year.
- #58 Do all of the quarterly California Department of Corrections and Rehabilitation Form 128E and Form 154 (and/or other official student school transcripts) reports contain current and appropriate information that includes credits earned, course completions? Does the appropriate instructional staff sign all of the above reports? (Supervisory staff when instructional staff is not available) Does supervisory staff (Academic Vice-Principal/Vocational Vice-Principal) review these reports? Not all California Department of Corrections and Rehabilitation Form 128Es have been reviewed by the supervisor. Not all California Department of Corrections and Rehabilitation Form 154 have Test of Basic Adult Education scores properly posted.

Office of Audits and Compliance Educational Compliance Branch ADMINISTRATION SECTION

#59 Are Education Files with a copy of the Record of Inmate Achievement (California Department of Corrections and Rehabilitation Form 154) transferred to Central Records when a student leaves education, transfers or paroles? Is the original copy of the Record of Inmate Achievement (California Department of Corrections and Rehabilitation Form 154 or High School Transcript) kept in the Education Office files in perpetuity? Are Education Files prepared for all assigned inmates? Are Bridging Education Program Education Files prepared for all assigned bridging students in the RC and transferred to the GP receiving institution? No copies of the Record of Inmate Achievement (California Department of Corrections and Rehabilitation Form 154) or High School transcripts are maintained.

Office of Audits and Compliance Educational Compliance Branch ACADEMIC EDUCATION SECTION

II. ACADEMIC EDUCATION:

80% COMPLIANCE

Deficiency:

#5 Does the Permanent Class Record Card (California Department of Corrections and Rehabilitation Form 151) reflect the minimum student contact time of 6.5 hours x-time or 8.5 hours of x-time for 4-10 programs for traditional classes? The students generally arrive between 0800 hours and 0830 hours. There was no evidence of "S" time being recorded on the Permanent Class Record (California Department of Corrections and Rehabilitation Form 151) cards. It appears that the actual in-class time is five (5) hours.

#6 Are Certificates of Completion or Achievement being issued to those students earning them? Only some of the teachers are issuing certificates of Achievements/Completions to students who earned them.

#8 Are the required and/or elective credits in the academic subject being taught issued to inmates and recorded on the transcript? The teachers did not know that they have the authority to give elective credits. Most did not know that Office of Correctional Education have a policy and procedure in place to issue High School Diplomas.

#9 Do all of the academic education classes have course outlines that agree with the California Department of Corrections and Rehabilitation approved curriculum? **Some of the teachers did not have a course outline.**

#19 Is a master inventory of Test of Adult Basic Education test booklets and answer sheets maintained by the testing coordinator? The test coordinator has a master inventory of test books and a check out system for testing books; however the answer sheets are not inventoried and monitored. The answer sheets need to be added to the master inventory and their count needs to be also tracked on the check out and in system.

#24 Is the Test of Adult Basic Education locator being used when needed to determine which level appropriate Test of Adult Basic Education test to administer? Many of the teachers are not using the Test of Basic Adult Education locator test.

#33 Do all of the Education/Work Program classes have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum? There is no Education/Work (half-time) program.

#36 Are teachers testing inmates within 10 days of being enrolled or assigned to Alternative Education Delivery Model program? Are the inmates' Test of Adult Basic Education subtest results analyzed by the teacher for appropriate Alternative Education Delivery Model lesson/class placement? The General Educational Development Test (GED) Express participants do not participate in the TABE Testing Matrix and the TABE Total Reading subtest results are not generally used for placement.

Office of Audits and Compliance Educational Compliance Branch ACADEMIC EDUCATION SECTION

#43 Do ESTELLE students have access to computers as required in the framework of the program for training? Does the teacher have Test of Adult Basic Education scores on all of the students in the program? All ESTELLE students do not have access to computers as required by the frame work of the program. It is reported by the outgoing Principal that the additional 16 computers are on order. The program frameworks require that all 24 assigned students have computers.

#55 Does the Pre-Release instructor use a variety of teaching methodologies and allow for differentiation of instruction to meet individual learners' needs? The Pre-Release teacher does not have inmates assigned to him; this program is delivered through the Alternative Education Delivery Model process.

#56 Is the Pre-Release class a full-time program (4 days/8.5, 5 days 6.5 hours)? If no, is there an exemption on file? The Pre-Release teacher does not have inmates assigned to him; this program is delivered through the Alternative Education Delivery Model Learning process.

#57 Are all of California Department of Corrections and Rehabilitation Form 128Es (that are used to record all education participation including course completions) and classroom records current and accurate and reflect a full-quota student enrollment? The Pre-Release teacher does not have inmates assigned to him; this program is delivered through the Alternative Education Delivery Model process

#68 Is there a current and comprehensive activity schedule for the Recreation and/or Physical Education Program? The coach stated that he did not have a comprehensive activity schedule in place.

Office of Audits and Compliance Educational Compliance Branch VOCATIONAL EDUCATION SECTION

III. VOCATIONAL EDUCATION:

80% COMPLIANCE

Deficiency:

#1 Are all of the inmate students' job descriptions accurate, complete, signed, and available? The job descriptions are generic and are generated outside of the education department. They do not reflect the correct work hours, start and end times, or the correct regular days off (RDO.)

#5 Does the Permanent Class Record Card (California Department of Corrections and Rehabilitation Form 151) reflect the minimum student contact time of 6.5 hours x-time or 8.5 hours of x-time for 4-10 programs? The students do not receive the required 6.5 or 8.5 hours of student contact time. The students on the 4-10 programs normally receive a total of 8 hours of student contact time. The students on the 5-8-40 programs receive a total of 6 hours of student contact time. The recorded "S" time on the Permanent Class Record (California Department of Corrections and Rehabilitation Form 151) needs to reflect the time students are unable to receive the required student contact time.

#6 Are elective credits in the designated vocational subject being issued to inmates and recorded on the transcript? Teachers are unaware they could be issuing credits to students who have earned them in their vocational training program.

#9 Do all of the vocational education classes have course outlines that agree with the California Department of Corrections and Rehabilitation curriculum? One of the teachers has a well-developed syllabus. The other teacher did not have a course outline for his program.

#11 Have the Literacy Implementation Plan sections (applicable to Vocational Education) been incorporated through a core set of literacy materials into the instructional plan and do lesson plans verify this? Neither teacher has incorporated a core set of literacy materials into their lessons plans. They indicated that the majority of their students were above the 9.0 grade point level.

#13 Are all of the vocational programs that have a nationally recognized certification programs participating in that program? One teacher is issuing National Center for Construction Education and Research certifications. The other teacher is new and needs direction on the certifications that are available within his trade and how to participate in issuing nationally recognized certifications.

#40 Does the instructor have a documented Trade Advisory Committee that meets at least quarterly? One teacher is active with his Trade Advisory Committee members. The other teacher has experienced difficulty establishing members. It is suggested that he conduct phone interviews, site visits when feasible and provide documentation of each occurrence.

Office of Audits and Compliance Educational Compliance Branch VOCATIONAL EDUCATION SECTION

#41 Is a current Employment Development Department Job Market Analysis and/or institutional Job Market Survey on file? One of the programs had a Job market survey on file. Both teachers indicated they talk with their students concerning job opportunities and skills needed to succeed in their respective trades.

Office of Audits and Compliance Educational Compliance Branch LIBRARY/LAW LIBRARY SECTION

IV. LIBRARY/LAW LIBRARY:

55% COMPLIANCE

Deficiency:

#2 Is the current Department Operation Manual, Section 53060 available in the main libraries and the satellite libraries? Is there a Department Operation Manual library supplement that is brief, and contains no new policies and/or regulations unless they are court-ordered and does the Department Operation Manual supplement reflect the current, actual local library program? There is no Department Operation Manual supplement for the library. There is an Operational Procedure #822 that has not been reviewed or revised since July 2005. All libraries have the 2007 edition of the DOM available.

#3 Are library hours of operation posted where GP inmates can see them, and do GP inmates have access to the library during off work hours? Do GP inmates have regular access to non-legal library services? Library hours are posted on the library window facing the academic area hallway. Minimum Support Facility library hours are posted outside the library door. Off-work hours are available for non-legal services the on Minimum Support Facility. A & B yards provide access to the library on weekends, but for law library access only. General Population inmates can access non-legal reading materials on A & B yards by paging only. Minimum security inmates have access to non-legal materials in A Dorm (mainly donated books, no actual library, using a vacant office once used for the Correctional Counselor which results in limited access for B dorm inmates.)

#5 If there are Restricted Housing inmates in the institution, is there a Department Operation Manual supplement relating to their use of the library? Is there a method for Restricted Housing inmates to request physical access to the law library which includes a list showing Restricted Housing inmates requests for access and inmates who actually used the library and is access granted for a minimum of one two-hour block of time if needed by the inmate, within seven calendar days of a request? There is no Department Operation Manual supplement detailing Restricted Housing inmate access. This is included in OP 822 Library and Law Library Services dated July 2005. The Administrative Segregation Unit, the Security Housing Unit, the Transitional Housing Unit, Psychiatric Security Unit and Enhanced Outpatient Program inmates may request Law Library access on a Law Library Access Request and a Security Housing Unit Law Library Access Request form.

#7 Are library funds spent for magazines/newspaper subscriptions, fiction and nonfiction books, supplies, processing, repair, and interlibrary loan fees? If other items are purchased, are they for library use? Library funds are used for fiction, nonfiction books, supplies for processing and repair and any other associated library expenses; these funds are not used for purchasing magazine or newspaper subscriptions.

#8 Are Inmate Welfare Funds used to purchase newspapers, magazines, and paperback fiction books, etc.? Inmate Welfare Funds are used for the purchase of paperback books only; they are not used for magazine or newspaper subscriptions purchases.

Office of Audits and Compliance Educational Compliance Branch LIBRARY/LAW LIBRARY SECTION

#11 Are law library discs checked in by the Associate Information Specialist Analyst? If not, who checks them in? The Receiving Warehouse notifies the Senior Librarian and she checks them in.

#13 Within the entire institution's libraries, is there at least one encyclopedia with a copyright date within the last five years and one unabridged dictionary (no older than 5 years? Does the library program have at least three directories relevant to the questions asked by the population served? There is a need to order an updated unabridged dictionary. There is one encyclopedia on disc that is current, must order a new edition prior to 2009 when timeframe expires. The Directory of Attorneys 2007 is in Facility A only, all other directories throughout the institution libraries, i.e. Business Phone Book, National Directory and Zip Code Directories are outdated (1998, 1996, 2002). They all need to be updated.

#14 Does each library in the institution have a current world almanac, an atlas that is no more than three (3) years old, an English language dictionary that is no more than five (5) years old, and a Spanish and English dictionary that is no more than ten (10) years old? The libraries need copies of updated Atlases, Almanacs Spanish/English Dictionaries, as well as English language dictionaries. All libraries have only outdated publications.

#16 Does each library in the institution have at least one textbook and two supplemental titles which have copyright dates not more than ten years old representing each vocational and academic program in the institution, a minimum of 100 titles representing high interest/low level reading books, a minimum of 250 multi-ethnic titles, including but not limited to Black American, Asian-American, Hispanic-American (inc. Spanish language) and Native American materials? All facility libraries lack textbooks reflecting current academic and vocational programs. Also the high interest/low level reading and multi-ethnic collections are deficient.

#17 Are book collections designed to meet the needs and interests of the inmate population served? Does the librarian regularly meet with an inmate library advisory group, and does the library maintain a suggestion box? Book collections do reflect needs and interests of the inmate population. The Senior Librarian does not meet with an inmate library advisory group, the Men's Advisory Council or the Site Literacy Committee. The Academic Vice-Principal meets with the Inmate Education Advisory Committee. Suggestions are received from education department staff and inmates via institution mail.

Office of Audits and Compliance Educational Compliance Branch LIBRARY/LAW LIBRARY SECTION

#22 Are the Gilmore v. Lynch mandated law books up to date? Does the library collection have the most current California Code of Regulations/Title 15 in English and Spanish? Is there a method of displaying proposed and actual revisions of California Code of Regulations/Title 15 for the inmate population, and does each library have a complete up-to-date Department Operation Manual? Are all the Law Library Electronic Delivery System computers up-to-date and operating in each library? The Senior Librarian has received some updates but was told by warehouse staff that if shelved she would be financially responsible since a new purchase order has not been received. Therefore the books and supplements are sitting in the library storage building. The California Code of Regulations/Title 15 revisions are posted. Law Library Electronic Data System are operating in all but Minimum Support Facility libraries. However the libraries are waiting for an update subscription to be processed by the Department of General Services.

#28 Do inmate library/law library clerks receive documented training? Are training records maintained for each inmate employee? Do inmate clerks receive training on a regular basis in law library and general library processes? The librarians have no inmate training and training records documentation in place. There is some staff training on general library procedures (overdues, checkout process.)

Office of Audits and Compliance Educational Compliance Branch FEDERAL GRANT PROGRAMS SECTION

V. FEDERAL PROGRAMS:

95% COMPLIANCE

Workforce Investment Act Program:

Deficiency:

No Deficiencies Noted.

Vocational Technical Education Act Program:

Deficiency:

#10 Are quarterly Trade Advisory meetings held and minutes kept? Number of Trade Advisory Committee members:

1st Class: None

2nd Class: 4 members

EXECUTIVE SUMMARY

Office of Audits and Compliance Educational Compliance Branch SPECIAL PROGRAMS SECTION

IV. SPECIAL PROGRAMS:	N/A	COMPLIANCE

OVERALL COMPLIANCE RATING: 76%.

Administrative staff is apprised that the ratings presented are to be considered tentative, and are subject to change pending final review by the Assistant Secretary, Office of Audits and Compliance. Significant changes in ratings will be documented with full explanations and forwarded to the Warden within 15 working days after the conclusion of the Compliance Review.

	April 24, 2008
G. Lynn Hada, Principal	•
	April 24, 2008
Raul Romero, Associate Superintendent	-

^{*} Denotes Developmental Disabilities Program (Clark Remedial Plan) and Physical Disabilities Program (Armstrong)

DEPARTMENT OF CORRECTIONS AND REHABILITATION

OFFICE OF AUDITS AND COMPLIANCE EDUCATIONAL COMPLIANCE BRANCH



COMPLIANCE REVIEW FINDINGS

Pelican Bay State Prison

April 21 through April 24, 2008

ADMINISTRATION G. Lynn Hada

ACADEMIC EDUCATION
Raul Romero, John Jackson

VOCATIONAL EDUCATION
Beverly Penland

LIBRARY Christine Long

FEDERAL SUPPLEMENTARY PROGRAMS

Mark Lechich

Ron Callison

Gary Sutherland

No.	INSTITUTION: PBSP DATE: April 21-25, 2008 COMPLIANCE TEAM: (Name)	Yes/No or NA	COMMENTS
	Allotments/Operating Expenses:	Yes	
1.	 Does the Principal maintain a budget tracking system to monitor the school departments' complete budget? Is there an annual spending plan to determine sub-allotments to programs, expenditures and their balance? 		
2.	Based upon current policy (amount of budget allotted) does it appear that a viable spending plan is in place in order for allocated funds to be fully utilized by year end?	Yes	
3.	Are funds allocated by Office of Correctional Education available and spent within program areas?	Yes	
4.	Are funds tracked by funding source? General Fund, special Budget Change Proposal funding, Federal and State Grant Programs allocated by Office of Correctional Education?	Yes	
5.	Are allocated funds for the Bridging Education Programs, including Arts In Corrections (AIC), used to provide program services to inmates?	Yes	
6.	Are law library purchases funded by the institution's general budget?	Yes	
7.	Is the school following the Education Hiring Steps and Responsibilities memo and matrix dated July 13, 2006 instructions when filling vacancies?	No	The school does not follow all steps in the Education Hiring Matrix every time.

	EDUCATION ADMINISTRATION SECTION			
8.	Are the Education Monthly Report (EMR) and the Education Daily Report (EDR) accurate and being completed and submitted on a timely basis?	Yes		
9.	Has adequate space and equipment been provided for staff to perform the required duties of the Reception Center/Bridging Education Program, Arts In Corrections program and the Television Specialist?	Yes		
10.	Credentials: Are all instructional and supervisory staff credentialed appropriately within subject matter area where they are assigned?	No	One teacher is inappropriately assigned to an Elementary Teacher position number 2287. The teacher has a single subject credential only and must be assigned to a High School position number 2290. It is recommended the Principal or Vice-Principal contact Max Free at the Office of Correctional Education to determine if the 2287 position number is "interchangeable" and can be changed to a 2290 by the Institutional Personnel Officer.	
11.	Does the assigned bridging staff hold appropriate credentials and/or placed in the appropriate Re-Entry classification?	N/A	There is only an Arts-in- Corrections program in the Bridging Education Program and this position does not require a credential.	
	Duty Statements:	Yes		
12.	Are 100% of the staff duty statements on file and applicable to current position?			
	Operational Procedures:	No	There is an Operational	
13.	Does the institution have an Operational Procedure that addresses the legislative mandates of the Bridging Education Program?		Procedure but it was last revised in January 2007.	

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14.	 Does the institution have an Operational Procedure for the Education Program? Does it use Department Operation Manual Chapter 10 as an inclusion? 	No	The Operational Procedure was last revised in July 2005. It has no reference to the Department Operation Manual either Chapter 10 or Chapter 5. It only addresses Academic Education issues with no mention of Vocational Education. It also states that if a potential student has a General Educational Development certificate or a High School Diploma, then he cannot be enrolled in an academic (Adult Basic Education, General Education Development and High School) program, notwithstanding the student's Test of Basic Adult Education scores.
	Staff Assignments:	Yes	
15.	Does the Principal maintain a current and complete list of all authorized positions and their status?		
16.	Are all staff appropriately working and/or assigned within the education program?	Yes	
17.	Do all staff within the education program report to, and are under the Principal's supervision?	Yes	
18.	Is the Bridging Education Program Reception Center/General Population/Arts In Corrections fully staffed with supervisory, instructional and ancillary personnel?	N/A	
19.	Are Re-Entry Program instructors, class code 7581, assigned only to the Bridging Education Program (BEP)?	N/A	

20	When Bridging Education Program vacancy occurs, is it immediately reclassified to class code 2290 Teacher, High School, General Education?	N/A	
21.	Has the Artist Facilitator been officially assigned to the Education Department?	Yes	
22.	Is there a system in place that is being utilized to ensure the tracking of inmates and their completed assignments during their transition from the Reception Center to the General Population Institution?	Yes	
23.	Has an individual been designated to be responsible for trouble-shooting the equipment and contacting Transforming Lives Network for needed support?	Yes	An Electronics Technician from Plant Operations.
24	When there is a modified program, class closure, etc., is a plan in place to continue to deliver education services and other required educational activities and is the plan always implemented?	Yes	
25	Is the Assessment Office Assistant (OA) performing duties delineated in the Assessment OA duty statement?	Yes	
26.	Alternative Education Delivery Model (AEDM): Is an approved Alternative Education Delivery Model Operational Procedure in place?	No	The current Operational Procedure was last revised in March 2006.

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27.	Are all of the Alternative Education Delivery Models being locally implemented at the institution in agreement with the California Correctional Peace Officers Association agreement and the institutional Operational Procedure per the Suzan Hubbard memo dated May 5, 2005?	No	There is no Education/Work program as required by the Alternative Education Delivery Model Operational Procedure.
28.	Are all Alternative Education Delivery Model positions filled?	No	There is no Education/Work program as required by the Alternative Education Delivery Model Operational Procedure.
29.	Do all Alternative Education Delivery Model faculty have the approved Alternative Education Delivery Model Duty Statement with required signatures?	Yes	All faculty that are assigned to an Alternative Education Delivery Model position have the proper duty statement.
30.	Are Alternative Education Delivery Model inmate enrollments/assignments being made based on eligibility criteria of the enrollments/assignment as defined in the course descriptions and guidelines?	Yes	
31.	 Are all Alternative Education Delivery Model Programs operating as full-time programs that meet the program-wide quotas? Are all approved Alternative Education Delivery Model faculty schedules posted? 	Yes	
	Gender Responsive Strategies:	N/A	
32.	Has all education staff received Gender Responsive Strategies training provided by the Female Offender Programs (FOP) institutional administration?		

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33.	Are female inmates' vocational assignments being made based on the eligibility criteria of the vocational assignment as defined in the course descriptions and vocational guidelines?	N/A	
34.	 Are Certificates of Vocational or Academic Life Skills Completion being issued to those students earning them and recorded on a tracking system? Are Certificates of Achievement issued to those students who exit the program before the Certification of Completion is earned? 	No	Certificates of Achievement are sometimes issued to students that have not left the class; they are issued for finishing orientation or safety, for example.
35.	Executive/Supervisory Assignments: Are documented staff meetings held regularly by Principal, Academic Vice Principal (AVP), and Vocational Vice Principal (VVP)? (monthly or more)	Yes	
36.	Is the Principal a member of the Warden's Executive Staff?	Yes	
37.	Does all supervisory staff conduct and record classroom visitations and observations on a quarterly basis?	No	Visitations and observations are done but are not being recorded.
38.	 Does the Academic Vice Principal/Vocational Vice Principal provide documented In-Service-Training and On-the-Job-Training? Are all probationary and annual performance evaluations currently due completed? 	No	Almost all of the annual performance evaluations are one year or more overdue. In Service Training and On the Job Training are provided and documented.
39.	Are supervisors documenting contact with staff and inmates involved in the bridging program?	No	Documentation of contacts between the supervisors and the Bridging Education Program inmates was not available.

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40.	Are Transforming Lives Network quarterly reports being submitted to Office of Correctional Education by the due dates of Oct. 10, January 10, April 10 and July 10?	Yes
41.	 Is the Principal trouble shooting Test of Adult Basic Education score losses identified on the School Program Assessment Report Card (SPARC)? Is the principal implementing remedial changes to improve the scores? 	Yes
42.	Is there a 4.0 reading level report generated and distributed to appropriate staff?	Yes
43.	Is a list of inmates who have a verified Learning Disability generated and distributed to appropriate staff?	Yes
44.	Accreditation: Has the education program been accredited by Western Association of Schools and Colleges (WASC), or has the application for accreditation been submitted to Western Association of Schools and Colleges?	Yes
45.	 Is there a continuing Western Association of Schools and Colleges process being followed by the school with the action plans being actively addressed in a timely manner. Is there a leadership team in place and do minutes substantiate regular meetings? 	Yes

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_		ATTOR SECTION	
	Inmate Enrollment/Attendance:	Yes	
46.	Do Academic, Vocational, Bridging Education Program, Enhanced Outpatient Program and Alternative Education Delivery Model enrollments meet the required program quotas (15:1, 27:1, 54:1, 120:1)?		
47.	Has the Institution developed an eligibility list for assigning inmates to the Bridging Education Program?	N/A	
48.	Does the Principal maintain a copy of the current inmate assignment waiting list?	Yes	
49.	Is education staff attending Institution Classification Committee (ICC) meetings for input into the placement of inmates into education programs?	Yes	
	Bridging Program:	N/A	
50.	Has the teaching staff met with each inmate upon assignment to the Bridging Education Program?		
51.	Are all Bridging Education Program eligible inmates receiving an education orientation packet upon arrival to the housing unit?	N/A	
	Transforming Lives Network (TLN):	Yes	
52.	Has the Transforming Lives Network satellite dish been installed and operational?		

53	Is the Literacy Coordinator (Academic Vice- Principal) designated as the Transforming Lives Network Coordinator?	Yes	
54.	Do the number of inmates being enrolled and the number completing Transforming Lives Network courses agree with the numbers reported to Office of Correctional Education?	No	The Education Monthly Report reports zero. In-house reports show completion figures of 47 inmates.
55.	Has Transforming Lives Network enrollment and completion data been tracked?	No	The enrollment and completion data is not tracked appropriately.
56.	 Is there a High School credit program and General Educational Development (GED) Testing program that follows Office of Correctional Education and State requirements? Are High School Diplomas and GED Equivalency Certificates issued to qualified inmates? 	No	There is no High School program at PBSP.
57.	Inmate Education Advisory Committee: Is there an Inmate Education Advisory Committee established with regularly scheduled monthly meetings?	No	The Inmate Education Advisory Committee has met sporadically, not monthly except for the last two months, for the past year.

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58.	 Do all of the quarterly California Department of Corrections and Rehabilitation Form 128E and Form 154 (and/or other official student school transcripts) reports contain current and appropriate information that includes credits earned, course completions, etc.? Does the appropriate instructional staff sign all of the above reports? (Supervisory staff when instructional staff is not available.) Does supervisory staff (Academic Vice- 	No	Not all California Department of Corrections and Rehabilitation Form 128Es have been reviewed by the supervisor. Not all California Department of Corrections and Rehabilitation Form 154 have Test of Basic Adult Education scores properly posted.
59.	 Principal/Vocational Vice-Principal) review these reports? Are Education Files with a copy of the Record of Inmate Achievement (California Department of Corrections and Rehabilitation Form 154) transferred to Central Records when a student leaves education, transfers or paroles? Is there a copy of the Record of Inmate Achievement (California Department of Corrections and Rehabilitation Form 154 or High School Transcript) kept in the Education Office files in perpetuity? Are Education Files prepared for all assigned inmates? Are Bridging Education Program Education Files prepared for all assigned bridging students in the Reception Center and transferred to the General Population receiving institution? 	No	No copies of the Record of Inmate Achievement (California Department of Corrections and Rehabilitation Form 154) or High School transcripts are maintained.
60.	If there are any contracted, Office of Correctional Education sponsored or special programs operating at the institution, have the teachers assigned to these programs received special/related training?	Yes	
61.	Literacy: Are literacy programs available to at least 60% of the eligible prison population?	Yes	

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62.	Is there an active Site Literacy Committee that meets and documents quarterly meetings, and is it coordinated by the Principal or an Academic Vice-Principal?	Yes		
63.	Does the Site Literacy Committee discuss the Bridging Education Program as part of its quarterly meetings?	Yes		
64.	Is the institution utilizing at least two alternate resources to implement literacy services for inmates?	Yes		
65.	Is there an established procedure for placing students into any existing Learning Literacy (LLL) lab? (a federally or non-federally funded Computer Aided Instruction /Plato/Computer Lab)	Yes	A pull-out program.	
66.	Developmental Disability Program and Disability Placement Program Programs: If this is a Developmental Disability Program and/or a Disability Placement Program site, does the principal have the required documentation that demonstrates adherence to the Court Remedial Plans and California Department of Corrections and Rehabilitation/Office of Correctional Education policies?	N/A		
67.	Is documentation available regarding the original operational intent/concept of the Estelle/Behavior Modification Unit Program and are there actual implementations of the program/programs?	Yes		

		/
68.	Is there an Estelle/Behavior Modification Unit Program monitoring and tracking process in place to record student progress through achievement/progress, data collection, instructional methods, and curriculum?	Yes
69.	Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) – Risk and Needs Assessment: Is there an approved Correctional Offender	N/A
	Management Profiling for Alternative Sanctions (COMPAS) Risk and Needs Assessment Operational Procedure (OP)?	
70.	Are all Recidivism and Reduction Strategy (RRS) Assessment positions filled (part of Correctional Offender Management Profiling for Alternative Sanctions)?	N/A
71.	Are all other designated assessment positions filled? Is there a designated supervisor over the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Risk and Needs Assessment Program?	N/A
72.	Do all designated assessment staff have an individual Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) logon code? Is the security of the code maintained?	N/A
73.	Does the assessment staff maintain appropriate security of laptop and/or stand-alone computers utilized for the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Risk and Needs Assessment Program?	N/A

	LDOOATION ADMINISTR	
	Recidivism Reduction Strategies:	N/A
74.	 Is there an Recidivism Reduction Strategies expenditure tracking log maintained by the Principal for the purposes of identifying equipment or materials purchase or provided to the institution for assessments as identified in the Recidivism Reduction Strategies Budget Change Proposal (BCP)? Are inventories of Recidivism Reduction Strategies equipment maintained and current? 	
	Recidivism Reduction Strategies Enhanced Outpatient Program:	Yes
75.	Are all Enhanced Outpatient Program staff hired and in place?	
76.	Does the Principal (via the Academic Vice- Principal) supervise the Enhanced Outpatient Program Teacher(s) in accordance with California Department of Corrections and Rehabilitation policy?	Yes
77.	Have the Enhanced Outpatient Program Teacher(s) received training in performing the required duties as described in the Enhanced Outpatient Program Duty Statement?	Yes
	Multi-Agency Re-entry Program (SB 618):	N/A
78.	Has the institution interviewed and hired for the Prison Case Manager positions as members of the Multi-Disciplinary team?	
79.	Are the four vocational programs referenced in Senate Bill 618 in place at the institution?	N/A

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80.	Has a documentation process been established to monitor inmate contact time as well as inmate growth and completion of program?	N/A	
81.	Vocational-Recidivism Reduction Strategies Are all original vocational Recidivism Reduction Strategies (RRS) teacher positions filled and are all classrooms operating?	Yes	The one Recidivism Reduction Strategies class is currently operating but the three Recidivism Reduction Savings vocational positions are not operating.
82.	Are all Recidivism Reduction Strategies vocational classes at full enrollment?	Yes	The one Recidivism Reduction Strategies class is currently operating at full enrollment. The three Recidivism Reduction Savings vocational positions are not operating.

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No	INSTITUTION: PBSP	V/N	
NO.	DATE: April 21-25, 2008 COMPLIANCE TEAM: John Jackson	Yes/No or N/A	COMMENTS
	Student Job Descriptions:	Yes	
1.	Are all of the inmate students' job descriptions accurate, complete, signed, and available?		
	Student Records/Achievements:	Yes	
2.	Do all the of classroom files reflect Test of Adult Basic Education scores that are being administered according to the quarterly testing matrix and that are not over six months old for students under the California Department of Corrections and Rehabilitation Literacy Plan criteria and Office of Correctional Education Test of Adult Basic Education testing requirements?		
3.	Are all of the California Department of Corrections and Rehabilitation Form 128E chronological reports, classroom records and timekeeping documents, current, accurate, and secure?	Yes	
4.	Is 100% of the California Department of Corrections and Rehabilitation curriculum recording system inuse, accurate, and current?	Yes	
5.	Do 100% of the Permanent Class Record Cards (California Department of Corrections and Rehabilitation Form 151) reflect the minimum student contact time of 6.5 hours x-time or 8.5 hours of x-time for 4-10 programs for traditional classes?	No	The students generally arrive between 0800 hours and 0830 hours. There was no evidence of "S" time being recorded on the Permanent Class Record (California Department of Corrections and Rehabilitation Form 151) cards. It appears that the actual in-class time is five (5) hours.
6.	Are Certificates of Completion or Achievement being issued to those students earning them?	No	Only some of the teachers are issuing certificates of Achievements/Completions to students who earned them.

	Instructional Expectations:	Yes	
7.	Do all of the academic education classes have lesson plans that agree with the California Department of Corrections and Rehabilitation approved curriculum?		
8	Are the required and/or elective credits in the academic subject being taught issued to inmates and recorded on the transcript?	No	The teachers did not know that they have the authority to give elective credits. Most did not know that Office of Correctional Education have a policy and procedure in place to issue High School Diplomas.
9.	Do all of the academic education classes have course outlines that agree with the California Department of Corrections and Rehabilitation approved curriculum?	No	Some of the teachers did not have a course outline.
	Bridging Education Program Instructional Expectations:	N/A	
10.	Is each teacher utilizing the established curriculum for Bridging Education Program and does each teacher has a copy of the curriculum?		
11.	Are the Test of Adult Basic Education and Comprehensive Adult Student Assessment System being Administered to Bridging Students? Are other assessments being used to assess the inmate job skills?	N/A	
12.	Does Bridging Education Program teacher utilize the proper Permanent Class Record Card (California Department of Corrections and Rehabilitation Form 151) that is up to date and accurate?	N/A	

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	ACADEMIC EDUCATI	<u> </u>	-011011
13.	Has the Bridging Education Program teacher developed a written weekly schedule to include student programs and contacts?	N/A	
14.	Test of Adult Basic Education Testing Coordinator: Are gain/loss reports (School Progress Assessment Report Card) and the Test of Adult Basic Education sub-test reports reviewed/shared with the education supervisors?	Yes	The reports are downloaded and then shared with the principal and vice-principal.
15.	Does the Test of Adult Basic Education Coordinator and at least two others have access to a California Department of Corrections and Rehabilitation email address and user account?	Yes	The internet connection is on the Comprehensive Adult Student Assessment System computer. All files are downloaded to a flash drive and transferred to the Test of Basic Adult Education computer. The Test of Basic Adult Education coordinator is very fortunate to have access at her office location.
16.	Does the Test of Adult Basic Education Coordinator have the most recent Test of Adult Basic Education database (within a week)?	Yes	The new version of the education database is downloaded weekly and then transferred to the Test of Basic Adult Education computer.
17.	Are Test of Adult Basic Education testing protocols signed by current staff?	Yes	The copy of the test protocols were in the Test of Adult Basic Education binder. The binder needs to be better organized for easier access.
18.	Are the Test of Adult Basic Education testing materials secured in a locked cabinet (mandatory standards)?	Yes	All testing materials were in the appropriate locked cabinet.

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19.	Is a master inventory of Test of Adult Basic Education test booklets and answer sheets maintained by the testing coordinator?	No	The test coordinator has a master inventory of test books and a check out system for testing books; however the answer sheets are not inventoried and monitored. The answer sheets need to be added to the master inventory and their count needs to be also tracked on the check out and in system.
20.	Is the Test of Adult Basic Education binder current and up-to-date with memos, purchase orders and instructions?	Yes	The documents are available within the binder but they need to be organized for easier accessibility and reference. All memorandums need to be reviewed for updated procedure changes.
21.	Is the Test of Adult Basic Education locator test being used when needed to determine which level appropriate Test of Adult Basic Education test to administer?	Yes	The locator tests are available but not used often.
	Teacher-Test of Adult Basic Education Testing	Yes	
22.	Are teachers testing within ten days of the student's initial entry into the classroom, as well as quarterly testing based on the Test of Adult Basic Education matrix?		
23.	Are the Test of Adult Basic Education tests administered according to the testing matrix?	Yes	
24.	Is the Test of Adult Basic Education locator being used when needed to determine which level appropriate Test of Adult Basic Education test to administer?	No	Many of the teachers are not using the Test of Basic Adult Education locator test.

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25.	Are teachers using Test of Adult Basic Education pre-post subtest diagnostic reports for student needs assessment and are they reviewing test scores with inmates?	Yes	
26.	Are teachers using the Test of Adult Basic Education pre-post diagnostic subtest test results as a diagnostic tool for individualized instruction and troubleshooting Test of Adult Basic Education score losses in their classes?	Yes	
27.	Are current Test of Adult Basic Education subtests placed in student's file?	Yes	
	Alternative Education Delivery Models:	Yes	They have a schedule that is
28.	Are Alternative Education Delivery Model Open Line schedules with dates and times posted in public areas for inmate access to educational services during off work hours?		shown on institutional TV that shows everything offered on the education channel.
29.	Are the Television Specialist and Distance Learning Study Teacher developing a Distance Learning Study Channel schedule of courses, with dates and times, posted in public areas for inmates to review and complete their assignments?	Yes	The Kentucky Educational General Educational Development tapes are shown on the institutional TV. All of the test areas of the General Educational Development are shown on the institutional TV according to schedule.
30.	Does the Television Specialist plan, supplement and implement electronic educational coursework with the Distance Learning teacher, utilizing Transforming Lives Network and airing educational programs, such as Kentucky Educational TV General Education Development series on a weekly basis?	Yes	Yes, when the math and writing courses are completed; and when the General Educational Development Math Express is completed.

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	Are teachers awarding inmates certificates for	Yes	Yes, when the math and writing courses are completed; and
31.	achievement/completion in Alternative Education Delivery Model programs?		the General Educational Development Math Express is completed.
32.	Do all of the Education/Independent Study (half-time) classes have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum?	N/A	There is no Education/Independent Study (half-time) program. The Operational Procedure for the Alternative Education Delivery Model states that this model will not be implemented at PBSP.
33.	Do all of the Education/Work Program (half-time) classes have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum?	No	There is no Education/Work (half-time) program.
34.	Do all of the Distance Learning classes have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum?	Yes	In addition to other enhancements.
35.	Do all of the Independent Study classes have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum?	Yes	The General Educational Development Express is open to everyone participating in the independent study program.
36.	 Are teachers testing inmates within ten days of being enrolled or assigned to an Alternative Education Delivery Model program? Are the inmates' Test of Adult Basic Education subtest results analyzed by the teacher for appropriate Alternative Education Delivery Model lesson/class placement? 	No	The General Educational Development Test (GED) Express participants do not participate in the TABE Testing Matrix and the TABE Total Reading subtest results are not generally used for placement.

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37.	 Is the Alternative Education Delivery Model current enrolled/assigned inmate roster consistently kept updated? Is it given to the Vice-Principal and Principal on at least a weekly basis? 	Yes	
38.	Are students' gains being recorded and tracked?	Yes	Student gains are being tracked by the Test of Basic Adult Education and Comprehensive Adult Student Assessment System testing.
	Gender Responsive Strategies:	N/A	
39.	Do all of the academic life skills classes have current course outlines that agree with the Office of Correctional Education/Gender Responsive Strategies (GRS) approved curriculum, i.e.? Women's Conflict and Anger Lifelong Management (W-CALM)(Feb. 2007), Women's Health (July 2007), Women's Parenting (January 2008) Women's Victims (July 2008)?		
40.	Do all of the academic life skills classes have current lesson plans that agree with the Office of Correctional Education/Gender Responsive Strategies approved curriculum?	N/A	
	ESTELLE and Behavior Modification Unit programs:	Yes	
41.	Is there an effective system in place to track monthly attendance, reporting, and evaluation of assigned inmates, their performance; and participation that allows a clear over-all rating of progress of each student in the Behavior Modification Unit/ESTELLE program?		

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42.	Is there a tracking and evaluation process to determine inmate progress on the Behavior Modification Unit curriculum competencies including Conflict and Anger Lifelong Management and is documentation provided to the Unit Classification Committee every 30 days detailing how the inmates assigned to the Behavior Modification Unit program are performing?	Yes	However, there are only 34 participants instead of the 48 required participants in the program. It is recommended that the BMU classification committee complete the process to provide additional inmates to fill the program to capacity. The prolonged period of under-capacity must be addressed as soon as possible.
43.	 Do ESTELLE students have access to computers as required in the framework of the program for training? Does the teacher have Test of Adult Basic Education scores on all of the students in the program? 	No	All ESTELLE students do not have access to computers as required by the frame work of the program. It is reported by the outgoing Principal that the additional 16 computers are on order. The program frameworks require that all 24 assigned students have computers.
	Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) – Risk and Needs Assessment:	N/A	
44.	Are assessment teachers conducting assessments on eligible inmates as defined by the current Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Operations Manual?		
45.	Does assessment staff utilize the current standardized Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Tracking Form?	N/A	
46.	Are the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) questionnaires shredded daily in accordance with confidential document procedure?	N/A	

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47.	Are assessment interviews conducted in a semi- private environment?	N/A	
48.	Is appropriate assistance provided to inmates during participation in the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) assessment interview in accordance with departmental policies regarding Effective Communication, the Clark Remedial Plan, and Armstrong mandates?	N/A	
49.	Security and Order: Are personal alarms issued to teachers and do they wear whistles and the personal alarms on their person?	Yes	
50.	Are exits clearly marked and emergency evacuation plans posted in accordance with the institution's emergency evacuation plan?	Yes	
51.	Pre-Release Does the Pre-Release curriculum contain Life Skills; Communication Skills; Attitude and Self-Esteem; Money Management; Community Resources; Job Application Training; Department of Motor Vehicles Practice Test; and Parole Services?	Yes	The Pre-Release program is delivered through the Alternative Education Delivery Model process. The packets that are distributed contain all of the elements of the Pre-Release curriculum.
52.	Do all of the Pre Release lesson plans contain the objective, handouts, and methods for student evaluation?	Yes	The packets were reviewed by me and they contained lesson plans that outlined what the students were expected to learn. Additionally, the pre-Release videos are shown on the institutional TV at scheduled times.

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53.	Is the Pre-Release teacher receiving appropriate institutional and Parole and Community Services Division (P&CSD) staff support?	Yes	The Parole Agent II Conducts a two hour class for those inmates who are paroling.
54.	Is the Pre-Release curriculum recording system in- use, accurate, and current and are copies of monthly records maintained?	Yes	The curriculum recording system was reviewed; as were copies of the Pre-Release monthly report that is sent to OCE.
55.	Does the Pre-Release instructor use a variety of teaching methodologies and allow for differentiation of instruction to meet individual learners' needs?	No	The Pre-Release teacher does not have inmates assigned to him; this program is delivered through the Alternative Education Delivery Model process.
56.	Is the Pre-Release class a full-time program (four days/8.5 hours or five days/6.5 hours)? If no, is there an exemption on file?	No	The Pre-Release teacher does not have inmates assigned to him; this program is delivered through the Alternative Education Delivery Model Learning process.
57.	Are all of California Department of Corrections and Rehabilitation Form 128Es (that are used to record all education participation including course completions) and classroom records current and accurate and reflect a full-quota student enrollment?	No	The Pre-Release teacher does not have inmates assigned to him; this program is delivered through the Alternative Education Delivery Model process.
58.	Does the Pre-release Teacher use the Framework for Breaking Barriers?	Yes	The Breaking Barriers frame work is shown on institutional TV; and it is also included in the packets given to the inmates.
59.	Does the Pre-release teacher provide the Office of Correctional Education with monthly Pre-release reports on time and maintain copies of those Monthly Pre-release reports?	Yes	A monthly report is sent to Office of Correctional Education.

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	Recidivism Reduction Strategies Enhanced Outpatient Program:	Yes	
60.	Is the Enhanced Outpatient Program Teacher a participating member of the Interdisciplinary Treatment Team (IDTT) meetings?		
61.	Is there a current roster of Enhanced Outpatient Program inmates determined eligible by Interdisciplinary Treatment Team (IDTT) and the Enhanced Outpatient Program teacher to receive education services?	Yes	However, currently there are only 9 Enhanced Outpatient Program inmates in the program. The program requires that there be 15 Enhanced Outpatient Program inmate participants. An additional 6 Enhanced Outpatient Program inmates are to be added as soon as possible (to total 15). There are 6 Psychiatric Service Unit inmates currently receiving assistance from the Enhanced Outpatient Program Teacher that should not be in the program. It is permissive at this time to continue assisting the 6 Psychiatric Service Unit inmates on a limited basis as long as all program requirements for 15 Enhanced Outpatient Program inmates are met. However, it is not within the Recidivism Reduction Strategies Enhanced Outpatient Program guidelines to provide assistance to Psychiatric Service Unit inmates and the teacher or the Office of Correctional Education Enhanced Outpatient Program Recidivism Reduction Strategies Manager can terminate assistance at any time.

62.	Is the required student assessment for development of the Individualized Treatment and Education Plan completed in accordance with the Enhanced Outpatient Program assessment guidelines timelines?	Yes	The current teacher is delivering outstanding services and has excellent Enhanced Outpatient Program student achievement gains. It is recommended that Office of Correctional Education provide the BRIGANCE-Comprehensive Inventory of Basic Skills (tests)-Revised for the Enhanced Outpatient Program teacher to test and track monthly achievement testing results data supplemental to Test of Basic Adult Education and Comprehensive Adult Student Assessment System. However, the BRIGANCE is not mandated by the Recidivism Reduction Strategies Enhanced Outpatient Program requirements and does not replace the Office of Correctional Education Test of Basic Adult Education testing matrix requirements.
63.	Is there documentation of the education services provided to Enhanced Outpatient Program inmates?	Yes	The current teacher maintains outstanding student participation, work and achievement records.
	Transforming Lives Network Program:	Yes	
64.	Are alternate modalities available for use within the housing units for the Distance Learning program? For example, video, Transitional Living Network, institutional television, visual worksheets, etc.?		
65.	Is the television specialist recording Transforming Lives Network broadcasting and archiving copies for re-broadcast and individual teacher access?	Yes	

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66.	Is the television specialist setting up a broadcast schedule for the school and distributing that schedule to the school faculty?	Yes	
67.	Are school faculty members given the opportunity to provide input into the broadcast schedule?	Yes	
	Recreation/Physical Education (P.E.):	No	The coach stated that he did
68.	Is there a current and comprehensive activity schedule for the Recreation and/or Physical Education Program?		not have a comprehensive activity schedule in place.
69.	Does the Physical Education teacher follow the California Department of Corrections and Rehabilitation approved selection process for movies?	Yes	PBSP has an Institutional Movie Review Committee; and the Inmate Advisory Committee also have a role in the movie selection process.
70.	Does the Physical Education teacher have sign-up sheets, team rosters, or other evidence of inmate participation in sports and health education activities?	Yes	
71.	Is California Department of Corrections and Rehabilitation-approved State frameworks curriculum being used and are course outlines present?	Yes	
72.	Are health education, physical fitness training and recreational activities being provided to the Special Needs populations?	Yes	
73.	Does the Physical Education teacher have a system in place to ensure accountability for state property including sports equipment, clothing and supplies?	Yes	

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74.	Are there sufficient supplies, such as board games and sports equipment, to ensure a viable Physical Education program?	Yes	
75.	Are time-keeping records (California Department of Corrections and Rehabilitation Form 1697) on inmates assigned to work for the Physical Education teacher being kept?	Yes	The recreation workers' time is kept by the Recreation Officer.
76.	Recidivism Reduction Strategies (Physical Education): Are health education, physical fitness training and	Yes	The coach stated that he has planed activities for the geriatric population; and he ordered special equipment for
	recreational activities being provided to the geriatric population (age 55 and over)?		their use.
77.	Have the funds for the Recidivism Reduction Strategies funds for the geriatric population been expended for the geriatric population?	Yes	Those funds were expended on equipment for the geriatric population.

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NO.	INSTITUTION: PBSP DATE: April 21-25, 2008 COMPLIANCE TEAM: Beverly Penland	Yes/No or N/A	COMMENTS
1.	Student Job Description: Are all of the inmate students' job descriptions accurate, complete, signed, and available?	No	The job descriptions are generic and are generated outside of the education department. They do not reflect the correct work hours, start and end times, or the correct regular days off (RDO.)
2.	Student Records/Achievements: Do all of classroom files reflect Test of Adult Basic Education scores that are not over six months old for students under the California Department of Corrections and Rehabilitation Literacy Plan and Office of Correctional Education Test of Adult Basic Education testing criteria?	Yes	The records reviewed were accurate. However, all inmates assigned to education need a record of a full battery Test of Adult Basic Education (TABE) 9/10 test including inmates who may be exempt. A TABE score of 9.0 on either a D or A level full battery TABE test and a General Educational Development certificate, High School Diploma or verified two years of college is required to be exempt from TABE testing.
3.	Are all of the California Department of Corrections and Rehabilitation Form 128E chronological reports, classroom records and timekeeping documents, current, accurate, and secure?	Yes	
4.	Is the curriculum recording system in-use, accurate, and current?	Yes	

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5.	Does the Permanent Class Record Card (California Department of Corrections and Rehabilitation Form 151) reflect the minimum student contact time of 6.5 hours x-time or 8.5 hours of x-time (on full days) for 4-10 programs?	No	The students do not receive the required 6.5 or 8.5 hours of student contact time. The students on the 4-10 programs normally receive a total of 8 hours of student contact time. The students on the 5-8-40 programs receive a total of 6 hours of student contact time. The recorded "S" time on the Permanent Class Record (California Department of Corrections and Rehabilitation Form 151) needs to reflect the time students are unable to receive the required student contact time.
6.	Are elective credits in the designated vocational subject being issued to students and recorded on their transcript in the education file?	No	Teachers are unaware they could be issuing credits to students who have earned them in their vocational training program.
7.	Are Trade/Industry Certifications being issued and recorded to those students earning them?	Yes	The National Center for Construction Education and Research certifications are issued.
8.	Are Certificates of Completion or Achievement as appropriate being issued and recorded for those students earning them?	Yes	
	Instructional Expectations:	No	One of the teachers has a well-
9.	Do all of the vocational education classes have course outlines that agree with the California Department of Corrections and Rehabilitation curriculum?		developed syllabus. The other teacher did not have a course outline for his program.
10.	Do all of the vocational education classes have lesson plans that agree with the California Department of Corrections and Rehabilitation curriculum?	Yes	

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11.	Have the Literacy Implementation Plan sections (applicable to Vocational Education) been incorporated through a core set of literacy materials into the instructional plan and do lesson plans verify this?	No	Neither teacher has incorporated a core set of literacy materials into their lessons plans. They indicated that the majority of their students were above the 9.0 grade point level.
12.	Are Vocational Instructors conducting and documenting at least four hours of approved related formal classroom training each week for all inmate students?	Yes	One of teachers conducts related training each morning for one hour. The other teacher uses hand-on and demonstrations which is then reinforced using formal classroom training.
13.	Are all of the vocational programs that have a nationally recognized certification programs participating in that program?	No	One teacher is issuing National Center for Construction Education and Research certifications. The other teacher is new and needs direction on the certifications that are available within his trade and how to participate in issuing nationally recognized certifications.
	Recidivism Reduction Strategies:	Yes	
14.	Are the Recidivism Reduction Strategies programs issuing trade certifications and/or National Center for Construction Education and Research (NCCER) certifications?		
	National Center for Construction Education and Research:	Yes	
15.	Are all the National Center for Construction Education and Research (NCCER) accreditation guidelines for Standardized Training being used?		
16.	Are the Building Construction Trades using the Contren Learning Series text books as the primary classroom text book?	Yes	

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17.	Do all of the National Center for Construction Education and Research instructors have the resources needed to effectively teach the related trades?	Yes	
18.	Are all of the building trade instructors currently National Center for Construction Education and Research Certified Instructors and have attended the Instructor Certification Training Program (ICTP)?	Yes	
19.	Are all of the craft instructors maintaining and conducting record keeping as outlined in the National Center for Construction Education and Research Accreditation Guidelines?	Yes	
20.	Are all of the instructors maintaining the confidentiality and maintain restricted access to inmate social security numbers used on the National Center for Construction Education and Research Form 200's?	Yes	
21.	Are all of the written National Center for Construction Education and Research tests, National Center for Construction Education and Research test CD-ROMs and National Center for Construction Education and Research answer keys maintained in a secure locked location with an inventory of the tests on hand?	Yes	
22.	Are all of the students evaluated based on a 70% minimum passing score on National Center for Construction Education and Research written examinations?	Yes	
23.	Are those students that fail a National Center for Construction Education and Research written test or practical exam required to wait a minimum of 48 hours prior to being retested?	Yes	

24.	Are 90% or more of the students completing the first six National Center for Construction Education and Research CORE Modules prior to starting the Level 1 for the trade?	Yes	
25.	Are all National Center for Construction Education and Research performance evaluations conducted for each module and a record of the Performance Profile Sheet maintained?	Yes	
26.	Upon successful completion of the National Center for Construction Education and Research written and performance evaluation, is the instructor documenting and submitting the Form 200 to the Unit Training Representative (UTR) for signature and forwarding to Office of Correctional Education within 60 days?	Yes	
27.	Are all of the instructors accepting National Center for Construction Education and Research Modules and Completion Certifications issued prior to students being assigned to the vocational class?	Yes	
	Test of Adult Basic Education TESTING	Yes	Both teachers indicated they
28.	Are teachers testing within ten days of the student's initial entry into the classroom, as well as quarterly testing based on the Test of Adult Basic Education matrix?		test their inmates.
29.	Are the Test of Adult Basic Education tests administered according to the testing matrix?	Yes	
30.	Is the Test of Adult Basic Education locator being used, when needed, to determine which level appropriate Test of Adult Basic Education test to administer?	Yes	

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31.	Are teachers using Test of Adult Basic Education pre-post subtest diagnostic reports for student needs assessment and are they reviewing test scores with inmates?	Yes	
32.	Are teachers using the Test of Adult Basic Education test results as a diagnostic tool for individualized instruction and trouble shooting Test of Adult Basic Education score losses in their classes?	Yes	
33.	Are current Test of Adult Basic Education subtests placed in student's file?	Yes	
	Gender Responsive Strategies:	N/A	
34.	Do all or more of the Gender Responsive Strategies (GRS) vocational classes have current course outlines that agree with the Office of Correctional Education/Gender Responsive Strategies approved curriculum, i.e. Cosmetology, Mill & Cabinet, Cable Technician, etc.?		
35.	Do all or more of the vocational classes have current lesson plans that agree with the Office of Correctional Education/Gender Responsive Strategies approved curriculum?	N/A	
	Security and Order:	Yes	
36.	Are personal alarms issued by institution to instructors and do they wear a whistle and the personal alarms on their person?		
37.	Are exits clearly marked and emergency evacuation plans posted in accordance with the institution's emergency evacuation plan?	Yes	

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COMPLIANCE REVIEW FINDINGS VOCATIONAL EDUCATION SECTION

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38.	Is there an Inmate Safety Committee that conducts and records weekly safety inspections?	Yes	
39.	Are at least one hour per month of safety meetings being held and documented?	Yes	
	Trade Advisory Committee:	No	One teacher is active with his
40.	Does the instructor have a documented Trade Advisory Committee that meets at least quarterly?		Trade Advisory Committee members. The other teacher has experienced difficulty establishing members. It is suggested that he conduct phone interviews, site visits when feasible and provide documentation of each occurrence.
	Job Market Analysis:	No	One of the programs had a Job
41.	Is a current Employment Development Department Job Market Analysis and/or institutional Job Market Survey on file?		market survey on file. Both teachers indicated they talk with their students concerning job opportunities and skills needed to succeed in their respective trades.
	Apprenticeship:	N/A	
42.	Is there an active Apprenticeship Training Program?		
43.	If there is an active Apprenticeship Training Program, do inmates meet apprenticeship requirements and receive pay?	N/A	
44.	Does the instructor have a documented active Joint Apprenticeship Committee that meets at least quarterly within the institution?	N/A	

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COMPLIANCE REVIEW FINDINGS VOCATIONAL EDUCATION SECTION

	Employee and Community Services Programs.	Yes	
45.	If vocational education programs are participating in Employee Services Programs, are they meeting Department Operation Manual and Penal Code requirements?		
46.	If vocational education programs are participating in community service projects, are they meeting Department Operation Manual requirements?	Yes	

NO.	INSTITUTION: PBSP DATE: April 21-25, 2008 COMPLIANCE TEAM: Christine Long	Yes/No or N/A	COMMENTS
1.	 Library Staffing: Does the Principal, Academic Vice-Principal, or Vocational Vice-Principal supervise the library staff? Does the Senior Librarian implement/plan the library program? 	Yes	The Principal supervises the library staff. The Senior Librarian has been in position for one year. Prior to her appointment the school used staff who did not hold the Master of Library Science degree as a Senior Librarian for an extended period of one year or more.
2.	Department Operations Manual and Department Operations Manual Supplement: • Is the current Department Operations Manual, Section 53060 available in the main libraries and satellite libraries? • Is there a Department Operations Manual library supplement that is brief, and contains no new policies and/or regulations unless they are court-ordered and does the Department Operations Manual supplement reflect the current, actual local library program?	No	There is no Department Operation Manual supplement for the library. There is an Operational Procedure #822 that has not been reviewed or revised since July 2005. All libraries have the 2007 edition of the DOM available.

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3.	Are library hours of operation posted where General Population inmates can see them, and do General Population inmates have access to the library during off work hours? Do General Population inmates have regular access to non-legal library services?	No	Library hours are posted on the library window facing the academic area hallway. Minimum Support Facility library hours are posted outside the library door. Offwork hours are available for non-legal services the on Minimum Support Facility. A & B yards provide access to the library on weekends, but for law library access only. General Population inmates can access non-legal reading materials on A & B yards by paging only. Minimum security inmates have access to non-legal materials in A Dorm (mainly donated books, no actual library, using a vacant office once used for the Correctional Counselor which results in limited access for B dorm inmates.)
4.	General Population Law Library Documentation: • Is there documentation of General Population inmates' access to law library for a minimum of two hours within seven calendar days of their request for legal use? • Is there a list showing inmates who request legal access, and those who received access?	Yes	Law library access for Minimum Support Facility inmates on Facility B was recently cancelled; currently the inmates have no physical access and can use the paging system only.

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5.	Restricted Housing Status Inmate Access: If there are Restricted Housing inmates in the institution, is there a Department Operations Manual supplement relating to their use of the library? Is there a method for Restricted Housing inmates to request physical access to the law library which includes a list showing Restricted Housing inmates requests for access and inmates who actually used the library and is access granted for a minimum of one two-hour block of time if needed by the inmate, within seven calendar days of a request?	No	There is no Department Operation Manual supplement detailing Restricted Housing inmate access. This is included in OP 822 Library and Law Library Services dated July 2005. The Administrative Segregation Unit, the Security Housing Unit, the Transitional Housing Unit, Psychiatric Security Unit and Enhanced Outpatient Program inmates may request Law Library access on a Law Library Access Request and a Security Housing Unit Law Library Access Request form.
6.	Restricted Housing Status Non-Legal Library Services: Do Restricted Housing inmates receive general library services?	Yes	Inmates submit a Book Request form. The Security Housing Unit, the Administrative Security Unit, etc. inmates may receive two books at a time for a two week checkout period.
7.	 Are library funds spent for magazines/ newspaper subscriptions, fiction and nonfiction books, supplies, processing, repair, and interlibrary loan fees? If other items are purchased, are they for library use? 	No	Library funds are used for fiction, nonfiction books, supplies for processing and repair and any other associated library expenses; these funds are not used for purchasing magazine or newspaper subscriptions.
8.	Inmate Welfare Funds (IWF) Expenditure: Are Inmate Welfare Funds used to purchase newspapers, magazines, and paperback fiction books, etc.?	No	Inmate Welfare Funds are used for the purchase of paperback books only; they are not used for magazine or newspaper subscriptions purchases.

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9.	Does the Senior Librarian understand the process associated with receiving the mandated law discs/books through the warehouse or mail room? Are the Stock Received Reports completed and submitted to the Regional Accounting Office?	Yes	Copies of the Stock Received Report are distributed by the Senior Librarian to Office of Correctional Education, and the Regional Accounting Office.
10.	 Are all received mandated law books and discs made available to inmates in a timely manner? Are the discs timely loaded on the Law Library Electronic Data System computer? Are the law books shelved promptly? 	Yes	When notified by the Warehouse that the discs have been received the Senior Librarian contacts the Associate Information Systems Analyst and inquires whether or not the Associate Information Systems Analyst wants the Senior Librarian to load the updates. The Senior Librarian is the usual person to load the computers.
11.	 Are law library discs checked in by the Associate Information Specialist Analyst? If not, who checks them? 	No	The Receiving Warehouse notifies the Senior Librarian and she checks them in.
12.	Does the librarian know what steps to take if a mandated law library book or disc is not received when it should be?	Yes	

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13.	Library Book Stock - Quality, Part I: • Within the entire institution's libraries, is there at least one encyclopedia with a copyright date within the last five years and one unabridged dictionary (no older than five years.) • Does the library program have at least three directories relevant to the questions asked by the population served?	No	There is a need to order an updated unabridged dictionary. There is one encyclopedia on disc that is current, must order a new edition prior to 2009 when timeframe expires. The Directory of Attorneys 2007 is in Facility A only, all other directories throughout the institution libraries, i.e. Business Phone Book, National Directory and Zip Code Directories are outdated (1998, 1996, 2002). They all need to be updated.
14.	Library Book Stock - Quality, Part II: Does each library in the institution have a current world almanac, an atlas that is no more than three years old, an English language dictionary that is no more than five years old, and a Spanish and English dictionary that is no more than ten years old?	No	The libraries need copies of updated Atlases, Almanacs Spanish/English Dictionaries, as well as English language dictionaries. All libraries have only outdated publications.
15.	Does each library regularly inspect the physical condition of their books? Does the library program have a book repair procedure	Yes	
16.	Library Book Stock - Quality, Educational Support, Literacy, Multi-Ethnicity: Does each library in the institution have at least one textbook and two supplemental titles which have copyright dates not more than ten years old representing each vocational and academic program in the institution, a minimum of 100 titles representing high interest/low level reading books, a minimum of 250 multi-ethnic titles, including but not limited to Black American, Asian-American, Hispanic-American (including Spanish language) and Native American materials?	No	All facility libraries lack textbooks reflecting current academic and vocational programs. Also the high interest/low level reading and multi-ethnic collections are deficient.

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17.	Are book collections designed to meet the needs and interests of the inmate population served? Does the librarian regularly meet with an inmate library advisory group, and does the library maintain a suggestion box?	No	Book collections do reflect needs and interests of the inmate population. The Senior Librarian does not meet with an inmate library advisory group, the Men's Advisory Council or the Site Literacy Committee. The Academic Vice-Principal meets with the Inmate Education Advisory Committee. Suggestions are received from education department staff and inmates via institution mail.
	Library Book Stock - Quantity: (Department Operations Manual Book Aug)	Yes	
18.	 Does the current library collection contain the number of fiction and nonfiction books mandated by California Department of Corrections and Rehabilitation? Does this include any new books purchased through Recidivism Reduction Strategies (RRS) funding? 		
19.	Have all books purchased through the Recidivism Reduction Strategies funds been received, shelved, and inmate use tracked?	Yes	The books have been processed and are in circulation. A tracking system is in place and the Senior Librarian reports their use on the quarterly library report.
	Book Access:	Yes	The libraries use printed booklists instead of a card
20.	 Is there a card catalog or equivalent system that inmates can use to find a book by title, author, or subject matter? Can inmates request books that are not in the library collection? 		catalog. The libraries occasionally borrow from the California State Library (Inter-Library Loan.)
	Circulation:	Yes	The libraries use the Follett automated system.
21.	Is there an adequate library book checkout system in place and an adequate overdue system in use?		automatou byotom.

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22.	 Mandated Law Library/California Code of Regulations, Department Operations Manual Are the Gilmore v. Lynch mandated law books up to date? Does the library collection have the most current California Code of Regulations/Title 15 in English and Spanish? Is there a method of displaying proposed and actual revisions of California Code of Regulations/Title 15 for the inmate population, and does each library have a complete up-to-date Department Operations Manual? Are all the Law Library Electronic Data System computers up-to-date and operating in each library? 	No	Senior Librarian has received some updates but was told by warehouse staff that if shelved she would be financially responsible since a new purchase order has not been received. Therefore the books and supplements are sitting in the library storage building. The California Code of Regulations/Title 15 revisions are posted. Law Library Electronic Data System are operating in all but Minimum Support Facility libraries. However the libraries are waiting for an update subscription to be processed by the Department of General Services.
23.	Law Library - American Disability Act (ADA): Are American Disability Act mandatory postings present in the library?	Yes	
24.	Circulating Law Library: Is a procedure for accessing the Circulating Law Library in place?	Yes	Use Inter-Library Loan system with the California State Law Library when necessary.
25.	Court Deadlines: Are court deadlines verified, and is there documentation that inmates with established court deadlines have priority access to the library?	Yes	Exception: the only access for Minimum Support Facility inmates is through paging at this time.
26.	Law Library Forms and Supplies: Do inmates have access to court required forms; are required legal supplies adequate and available; are procedures to distribute forms and supplies appropriate; and do all law libraries follow the same law library procedures?	Yes	

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27.	General Library Forms and Supplies: Are adequate supplies available to process library materials, and are there standardized forms for library procedures that are used by all the libraries in the institution?	Yes	Library staff noted that requests for library institution stationary supplies have not been complete. The librarians recently submitted a purchase request for additional supplies.
	Inmate Clerk Training:	No	The librarians have no inmate
28.	 Do inmate library/law library clerks receive documented training? Are training records maintained for each inmate employee? Do inmate clerks receive training on a regular basis in law library and general library processes? 		training and training records documentation in place. There is some staff training on general library procedures (overdues, checkout process.)
	Security and Order:	Yes	
29.	 Are personal alarms issued by institution to library staff; does library staff wear a whistle and the issued personal alarms? Are exits clearly marked and evacuation plans posted in accordance with the institution's emergency evacuation plan? 		

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INSTITUTION: Pelican Bay State Prison	YES/NO	COMMENTS
DATE: April 15, 2008	or NA	
COMPLIANCE TEAM: Mark Lechich		

Duty	Statement/Job Description/Credentials	- Literacy	Learning Lab
1.	Do you have a current duty statement on file (within one year)?	N/A	Pelican Bay State Prison does not have Phase I & II Literacy Learning Lab.
2.	Do you have a valid credential on file?	N/A	
Secu	irity/Order – Literacy Learning Lab		
3.	Are personal alarms issued by the institution to teaching staff and worn?	N/A	
4.	Are exits clearly marked and emergency evacuation plans posted in accordance with the institution's emergency evacuation plan?	N/A	
Supe	ervisory/Support - Literacy Learning Lab		
5.	Do you receive support from your supervisor and other educational staff?	N/A	
6.	Does the Vice Principal visit/observe your class? Does the Principal visit/ observe your class? Do you maintain a sign-in log?	N/A	
Inma	te Enrollment – Literacy Learning Lab	.	
7.	Do you maintain a minimum enrollment of 27 students?	N/A	
8.	Do students receive direct/group instruction?	N/A	
9.	Is the Literacy Learning Lab a "self contained" program?	N/A	
Stud	ent Records/Testing Achievements - Lit	eracy Lear	ning Lab
10.	Do you verify non-General Education Development or non-High School graduation of the student?	N/A	

	INSTITUTION: Pelican Bay State Prison DATE: April 15, 2008 COMPLIANCE TEAM: Mark Lechich	or NA	COMMENTS
11.	Do you start a student record file upon the student entering the Literacy Learning Lab program?	N/A	
12.	Does each student have a current Test of Adult Basic Education score? <i>If not, do you refer the student for testing?</i>	N/A	
13.	Do you assess student's basic skill level? Describe	N/A	
14.	Are at least 90% of the California Department of Corrections and Rehabilitation Form 128E' chronological reports, classroom records and accountability documents current, accurate and secured?	N/A	
15.	Are the Student Files current (incl. Test of Adult Basic Education scores and any other assessment scores)? <i>Review</i>	N/A	
16.	Is there a current Student Job Description on file?	N/A	
Instr	uctional Expectations – Literacy Learnin	ıg Lab	
17.	Do you use the approved California Department of Corrections and Rehabilitation Competency Based Adult Basic Education curriculum?	N/A	
18.	Are differentiated instructional methods used? Describe	N/A	
19.	Do students track their own progress?	N/A	

	INSTITUTION: Pelican Bay State Prisor DATE: April 15, 2008 COMPLIANCE TEAM: Mark Lechich	or NA	COMMENTS
20.	Do the students receive computer orientation? Is there continuous training? Describe	N/A	
21.	Do you maintain course outlines and lesson plans? <i>Review files</i>	N/A	
22.	Do you use alternative assessment instruments (besides the required Test of Adult Basic Education), to determine a student's instructional plan? Describe	N/A	
23.	Do students spend an average of six months of instructional time enrolled in the program?	N/A	
Othe	r Services – Literacy Learning Lab		
24.	Do you refer students to other services, i.e. medical? Describe the process	N/A	
25.	Do you provide the students career-related information?	N/A	
26.	Do you have student aides? If so, how many and how are they used?	N/A	
27.	Have you participated in conferences, workshops and seminars from July 1, 2007– December 31, 2008? If so, provide a list.	N/A	
Expe	enses – Literacy Learning Lab		
28.	Are spending levels appropriate for material purchases and training to support program needs?	N/A	
Equi	pment – Literacy Learning Lab		

	INSTITUTION: Pelican Bay State Prison DATE: April 15, 2008 COMPLIANCE TEAM: Mark Lechich	YES/NO or NA	COMMENTS
29.	Do you maintain a complete and current inventory of equipment? Is equipment tagged with a Workforce Investment Act property tag? <i>Conduct an inventory</i>	N/A	
30.	Is your software appropriately maintained by PLATO's technical field staff?	N/A	
31.	Do you register all new software purchases with the Associate Information Systems Analyst?	N/A	
Com	mittees/Meetings - Literacy Learning Lab)	
32.	How often do you meet with the referral teacher for consultation on a student?	N/A	
CAS	AS/TOPSpro Management Information Sy	stem (MIS) Coordinator
33.	Have you been trained in the area of California Accountability and the TOPSpro Management Information System to appropriately perform your duties as a Comprehensive Adult Student Assessment System Coordinator? When was the date of the last training? <i>Dates of last trainings</i>	Yes	Ms. Thogmartin attended the April, 2008 and the October, 2007 TOPSpro training conducted by the WIA Administrator. She also attended the 2007 CASAS Summer Institute as Presenter.
34.	Do you have an adequate amount of Comprehensive Adult Student Assessment System (CASAS) testing materials to implement CASAS? Explain the CASAS testing procedures at your institution.	Yes	Adequate amount of testing materials. The teachers pick-up the testing materials in the Education Office. Sign-Out/Sign In Sheet system is in place.
35.	Are the Comprehensive Adult Student Assessment System testing materials appropriately inventoried and secured?	Yes	Locked in cabinet in secured Education Office.

Workforce Investment Act (WIA)

INSTITUTION: Pelican Bay State Prisor DATE: April 15, 2008 COMPLIANCE TEAM: Mark Lechich	or NA	COMMENTS
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36.	Are you using the latest version of the TOPSpro Management Information System software?	Yes	TOPSpro version 4.6 Build 69.
37.	Is the hardware equipment (Scantron machine) and software (TOPSpro Management Information System) used to implement Comprehensive Adult Student Assessment System appropriately maintained?	Yes	The computer is in good shape. The scanner is antiquated, however is operating well at this time.
38.	Do you provide each teacher with a Student Performance by Competency Report to assistance them in preparing lesson plans?	Yes	Competency Reports for Students and Class. Student Gains by Class Report is also given to the classroom teachers.
39.	Do you know how to generate the California Payment Point Report? Can you generate a Preliminary Payment Point Report?	Yes	Ms. Thogmartin checks the Payment Point Report after each scanning. The Preliminary Report is also checked for cleaning data.
40.	Are the appropriate students receiving and completing the Core Performance Surveys? Explain the process in place to ensure that students are receiving the surveys.	Yes	If the ex-student is still at the institution the CASAS Coordinator would hand deliver Survey to the ex-student to complete the form.
41.	Can you generate an up to date list of students that will be receiving the Core Performance Survey for the past quarter?	Yes	Second Quarter data indicated that one student needed to complete the survey. The ex-student had left the institution.
42.	Can you generate a Data Integrity site review?	Yes	Data Integrity Report is used for assisting Coordinator to locate errors in the data.

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Workforce Investment Act (WIA)

	INSTITUTION: Pelican Bay State Prison DATE: April 15, 2008 COMPLIANCE TEAM: Mark Lechich	YES/NO or NA	COMMENTS
43.	Can you generate a Student Gains by Class Report? Can you produce five student Entry/Update records and Pre/Post Test records? (Check reports with Student Gains by Class Report and Student Lister. Dates, testing books, and scores should match between records)	Yes	This report is given to teachers and supervisors to account for the students learning gains. All records matched.

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COMPLIANCE REVIEW FINDINGS FEDERAL GRANTS PROGRAMS SECTION

Carl D. Perkins Act
Vocational and Technical Education Act Grant

No.	INSTITUTION: PBSP DATE: April 15, 2008	Yes/No	COMMENTS
	COMPLIANCE TEAM: Ron Callison	or N/A	COMMENTS

Inma	te Enrollment			
1.	Is the class meeting the Office of Correctional Education required enrollment quota? (Note the actual enrollment in the comments section).	Yes	Class 1: Enrollment: 25 Class 2: Enrollment: 22	
Equi	pment Inventory			
2.	Is the Vocational and Technical Education Act equipment properly tagged? (Note the condition of equipment in the comments section).	Yes	Condition of equipment: Excellent.	
		3.6		
3.	Is Vocational and Technical Education Act equipment used for the intended purpose?	Yes		
Stud	ent Records/Testing Achievements			
4.	Are course completions being issued for Office of Correctional Education program training requirements? How many students are trained per year? (Note the number of students trained per year in the comments section).	Yes	Number of students trained per year for both classes is 102.	
5.	Do Student files verify equipment training on California Department of Corrections and Rehabilitation Form 128E?	Yes		

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COMPLIANCE REVIEW FINDINGS FEDERAL GRANTS PROGRAMS SECTION

Carl D. Perkins Act
Vocational and Technical Education Act Grant

No.	INSTITUTION: PBSP DATE: April 15, 2008 COMPLIANCE TEAM: Ron Callison	Yes/No or N/A	COMMENTS	
6.	Is the Office of Correctional Education- approved curriculum and recording system in use?	Yes		
7.	Are lesson plans in accordance with Office of Correctional Education guidelines?	Yes	National Center for Construction Education and Research Construction Technology in one class.	
Rela	ted Training			
8.	Is safety and literacy training taking place in accordance with Office of Correctional Education guidelines?	Yes		
Voca	ational Classroom Physical Access			
9.	Are students able to get physical to the vocational shops over 50% of the time? (Note the "X" and "S" time for the last two prior months).	Yes	Month/Class X-time hours hours 1st 1st 2300 404 2nd 1st 1988 860 1st 2nd 1783 791 2nd 2nd 2230 423 Totals: 8301 2478	
Trad	e Advisory Committee		-	
10.	Are quarterly meetings held and minutes kept? (Note the Number of Trade Advisory Committee members, number in the comments section).	No	Number of TAC members: 1 st Class: None 2 nd Class: 4 members	

COMPLIANCE REVIEW FINDINGS FEDERAL GRANTS PROGRAMS SECTION

Carl D. Perkins Act
Vocational and Technical Education Act Grant

	INSTITUTION: PBSP		
No.	DATE: April 15, 2008	Yes/No	
Ī	COMPLIANCE TEAM: Ron Callison	or N/A	COMMENTS

Supp	olemental Areas (not counted for points	on the ove	rall Compliance Review)
11.	Apprenticeship: Number of apprentices Institutional Pay Union/Company Affiliation Current DAS Form OJT Work Logged Less than 5 years	N/A	
12.	Is the shop clean? (Note the cleanliness and general maintenance of the shop in the comments section).	Yes	

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION OFFICE OF AUDITS AND COMPLIANCE

REPORT OF FINDINGS

INMATE APPEALS

PELICAN BAY STATE PRISON APRIL 15 THROUGH APRIL 25, 2008



CONDUCTED BY

INMATE APPEALS BRANCH

FINAL REPORT INMATE APPEALS AUDIT

Pelican Bay State Prison April 21-24, 2008

Review Team: Rick Manuel, Facility Captain, Inmate Appeals Branch Steve Chapman, CC-II, Inmate Appeals, HDSP

SUMMARY CHART

AREA REVIEWED	RATING 2007	
	Score	Page No.
OVERALL RATING	96	1
A. ACCESS TO INMATE APPEALS	99	2
B. TRACKING/FILING APPEALS	100	4
C. PREPARATION OF APPEALS	97	5
D. TIMEFRAMES	95	6
E. APPEAL RESPONSES	99	7
F. SPECIALIZED PROCESSING OF APPEALS	100	8
G. TRAINING and OFFICE STAFFING	80	10
H. CURRENT OVERDUE APPEALS	97	11

INMATE APPEALS AUDIT FINAL REPORT

Pelican Bay State Prison April 21-24, 2008

INMATE APPEALS AUDIT

The findings in this Inmate Appeals Audit resulted in an overall score of 96%. All areas and their results are listed below.

Chris Wilbur, CC-II, Debra Jacquez, CC-II, and Nancy Threm, CC-II, assigned to the Appeals Office, are experienced and knowledgeable in all facets of the appeal process. The Appeals support staff, Debbie Miller, Office Technician and Diane (Di) Larson, Office Technician, were helpful to the audit team. They were able to locate documents needed for the Review and provide information to assist the audit team. Additionally, Joe Kravitz, CC-II, and Cynthia Gorospe, SSA, assigned to the Health Care Appeals Office, as well as Christa Skeels, Office Technician, were helpful in the audit of ADA and Medical appeals. It was indeed a pleasure to work with all of the staff assigned to the Appeals Office.

The specific sections and their corresponding questions and scores are identified below. Copies of the Inmate Appeals Worksheets are available upon request.

A. ACCESS TO INMATE APPEALS: Section Rating: 99

1) Do the law libraries, general population, and special housing units have the appropriate forms available on request from the inmate? [CCR 3084.1 (c)]

<u>42</u> sample # <u>41</u> # correct = <u>98</u> % Question Rating: 50 **Score: 49**

All of the housing units have a good supply of both CDC Form 602s and 1824s. The Housing Unit staff were cooperative with the audit team and familiar with the Appeals Process. Staff were aware of their responsibility in routing the appeals to the Appeals Office.

2) Does the institution provide inmate access to the California Code of Regulations (CCR), Department Operations Manual (DOM), Section 54100, Inmate/Parolee Appeals, and CDC Form 1824s in each inmate law library? [DOM Section 53060.11,54100.3]

3 sample # 3 # correct = 100 % Question Rating: 10 **Score:** 10

There was easy access to the forms and manuals in the law libraries.

3) Does the institution provide the orientation inmates a written summary of the inmate's right to appeal and appeal procedures? [CCR 3002(a)(2)]

Yes Question Rating: 20 **Score: 20**

All inmates are provided an Orientation Booklet that includes information regarding the CDC Form 602 process.

PBSP April 21-25, 2008 Page 3 of 11

4)	Does the institution provide the orientation inmates verbal staff instruction regarding the inmates right to appeal and appeal procedures? [CCR 3002(a)(2)]						
	Yes	Question Rating:	20	Score:	20		
		SECTION POINT	TOTAL		99		
5)	**Does the institution provide the CDC	Form 602 in both I	English	and Spani	sh?		
	Yes	Question Rating:	0	Score:	0		
	CDC Forms in Spanish are available in the Appeals Office.						
	** This question is for information gathering only.						

B. TRACKING AND FILING APPEALS

Section Rating: 100

1. Does the Inmate Appeals Office utilize the automated Inmate Appeals Tracking System (IATS) to record all appeals received at the formal levels? [DOM Section 54100.9]

Yes

Question Rating:

15

Score:

15

***It should be noted that Health Care Appeals Staff utilize the Medical Appeals Tracking System (IMATS), as the method of tracking submitted appeals.

2. A review of the appeals files indicate the appeal forms have been copied on both sides and supplemental documents are attached? [DOM Section 54100.3]

<u>100</u> sample # <u>100</u> # correct = <u>100</u>% Question Rating: 25 **Score: 25**

3. Does the institution implement an appeal decision (granted or granted in part) modification order within 90 days? [CCR 3084.5(i)]

20 sample # 20 # correct = 100 % Question Rating: 25 **Score:** 25

4. Is there a procedure and tracking system in place for noticing Administrative Staff of overdue appeals?

[CCR 3084.6, DOM 54100.12]

Yes

Question Rating:

35

Score:

35

*The Administrative Staff are noticed weekly of the overdue appeals on a consistent basis. It is evident that late appeals are a priority to all staff as there are currently no overdue appeals.

C. PREPARATION OF APPEALS

Section Rating

97

1) Are inmates interviewed at the first level of review or at second level if first level is waived? [CCR 3084.5 (f) and DOM 54100.14]

100 sample # 98 # correct = 98 % Question Rating: 25 **Score: 25**

*Staff at PBSP do an excellent job of noting the inmate interview was conducted at either the first or second level of review.

2) Do the dates on the appeal correspond with the dates on the IATS? [DOM Section 54100.9]

<u>100</u> sample # <u>96</u> # correct = <u>96</u> % Question Rating: 25 **Score: 24**

**Observation: On many of the audited appeals, the Return Date documented in Sections "F" and "G" were found to be inconsistent with the complete date, reflected in the IATS. Appeals staff correctly imputed the complete date into the IATS; however, the actual Return date was not documented on the completed appeal until after staff made copies of the appeal and it was actually ready to be sent to the inmate. This in-house process resulted in the actual Return date being documented as a date that was beyond the required Due Date. Appeals Staff discovered this procedural error prior to this audit and corrected the process by ensuring that both the IATS compete date and actual Return Date are the same and that the completed appeal is returned to the inmate prior to, or on the actual due date. Even though many of the audited appeals were found to be deficient in this area, no points were deducted as the audit team is satisfied that the problem was corrected prior to the audit.

3) A review of the appeals indicate they are complete, all dates included and signatures included (all blanks filled in appropriately on the CDC Form 602)? [DOM Section 54100.3]

<u>100</u> sample # <u>92</u> # correct = <u>92</u>% Question Rating: 25 **Score:** 23

4) Is there evidence that appeal decisions are reviewed by the institution head or his/her designee? ?[CCR 3084.5(e)(1)]

<u>94</u> sample # <u>94</u> # correct = <u>100</u>% Question Rating: 25 **Score: 25**

D. TIMEFRAMES Section Rating: 95

1) Are appeals being assigned at each level within five working days of receipt in the Appeals Office? [DOM 54100.9]

<u>100</u> sample # <u>100</u> # correct = <u>100</u>% Question Rating: 25 **Score: 25**

**Appeals staff are to be commended, as reviewed appeals reflect that staff consistently "date stamp" the received appeal as soon as it is received in the Appeals Office and then assign the appeal within the five-day requirement.

2) Are informal appeals completed within ten working days? [CCR 3084.6 (b)(1)]

<u>22</u> sample # <u>20</u> # correct = <u>91</u> % Question Rating: 25 **Score:** 23

3) Are first-level responses completed within 30 working days? [CCR 3084.6 (b)(2)]

82 sample # 80 # correct = 98 % Question Rating: 25 **Score:** 24

4) Are second-level responses completed within 20 working days, or 30 working days if first level is waived pursuant to section 3084.5(c)? [CCR 3084.6 (b)(3)]

94 sample # 88 # correct = 94 % Question Rating: 25 **Score:** 23

E. APPEAL RESPONSES

Section Rating: 99

1) Does the institution prepare a written response at the first level of review stating the appeal issue?

[CCR 3084.5 (g) and DOM 54100.15]

82 sample # 78 # correct = 95 % Question Rating: 25 **Score:** 24

2) Does the institution prepare a written response at the first level of review stating the reasons for the specific decision being rendered? [CCR 3084.5 (g) and DOM 54100.15]

82 sample # 82 # correct = 100 % Question Rating: 25 **Score: 25**

3) Does the institution prepare a written response at the second level of review stating the appeal issue?

[CCR 3084.5 (g) and DOM 54100.15]

<u>94</u> sample # <u>94</u> # correct = 100_% Question Rating: 25 **Score: 25**

4) Does the institution prepare a written response at the second level of review stating the reasons for the specific decision being rendered?

[CCR 3084.5 (g) and DOM 54100.15]

94 sample # 94 # correct = 100 % Question Rating: 25 **Score: 25**

No Restrictions:

F. SPECIALIZED PROCESSING OF APPEALS Section Rating: 100 STAFF COMPLAINTS APPEAL RESTRICTION STAFF COMPLAINTS 1) When a staff complaint is filed against a Peace Officer, is notice given to that Peace Officer regarding the filing of the complaint? (Unit 6 Memorandum of Understanding, Section 9.09(D), Personnel Investigations.) Yes Question Rating: 20 Score: 20 institution keeping Staff Complaints for a 2) Is the period of five vears? [DOM 54100.25.5 and Penal Code 832.5(b)] Yes Question Rating: 20 Score: 20 Are all allegations of staff misconduct presented to the warden or designee for 3) determination of the type of inquiry needed? [AB 05/03] Yes Question Rating: 20 Score: 20 Are all allegations of staff misconduct presented to the warden or designee at least 4) weekly? [AB 05/03] Yes Question Rating: 20 Score: 20 APPEAL RESTRICTION 5) Is there evidence of authorization from the Chief of the Inmate Appeals Branch (IAB) to place an inmate on restriction? [CCR 3084.4(3), (4)]

100 %

SECTION POINT TOTAL 100

Score:

20

rage o receivment there

Question Rating: 20

G. TRAINING/OFFICE STAFFING **Section Rating:** 80 1. Is there evidence that the Appeals Coordinator works with the In-Service Training (IST) officer to ensure that training on the appeals procedure is carried out? [DOM 54100.3] No 0 Question Rating: 20 Score: There is no evidence that the Appeals Coordinator participates in training regarding the Inmate Appeals process. 2. Is there evidence that the Inmate Appeals Process training is provided to new supervisors during Supervisor's Orientation? [DOM 32010.10.2] Yes Question Rating: 30 30 Score: ***Even though Appeals Process training is not provided to new supervisors at PBSP; IST staff demonstrated that new supervisors receive Appeals Process training during attendance of the Supervisor's Advanced Academy. 3. Is there an updated Inmate Appeals lesson plan, which identifies recent changes in **Department policy?** [DOM 32010.8.4, 54100.3] Yes Question Rating: 30 Score: 30 4. If an inmate is assigned as a clerk in the unit, is he/she prevented from having access to the CDC Forms 602 at any level? [CCR Sections 3370(b) and 3041(e)(1)] 20 Yes 20 Score: Question Rating: No assigned Inmate Clerk in the Appeals Office.

SECTION POINT TOTAL 80

Recommendation: Ensure that Appeals Coordinator participates in Appeals process training and that supervisors are provided training in the Appeals Process during Supervisor's Orientation.

CURRENT OVERDUE APPEALS

1) What is the number of the current overdue First Level appeals and by how many days late?

[CCR 3084.6, DOM 54100.12]

# of Days late	Number of Appeals	Pts	Point Deduction (Per appeal)
0-30 days	12	.25	3
31-90 days	0	.50	0
91-180	0	.75	0
181+	0	1	0

Question Rating: 50 Points deducted: 3 Score: 47 Section Total: 97

2) What is the number of the current overdue Second Level appeals and by how many days late?

[CCR 3084.6, DOM 54100.12]

# of Days late	Number of Appeals	Pts	Point Deduction	
			(Per appeal)	
0-30 days	0	.25	0	
31-90 days	0	.50	0	
91-180	0	.75		
181+	0	1		

Question Rating: 50 Points deducted: 0 Score: **50**

APPEALS OVERDUE FROM OTHER INSTITUTIONS (NOT COUNTED):

# of Days late	Number of Appeals	Pts	Point Deduction
			(Per appeal)
0-30 days	0	.25	
31-90 days	1 LAC	.50	
91-180	1 Reg III	.75	
181+		1	
# of Appeals: 2	Poir	nts Dedu	ucted: Score: N/A

*There were 2 overdue appeals from other institutions.

<u>ADDITIONAL AREAS OF REVIEW</u>: This portion has been added to the audit format; however, these areas of the institution are reviewed for information gathering and scores will not be obtained.

1. Law Library access for ASU/SHU inmates:

a) What is the process for allowing ASU/SHU inmates access to the law library? [CCR 3122, 3160, 3164, 3343]

ASU/PSU inmates are escorted to the facility library once a week for two hours per visit. The schedule allows for different housing units on specific days to ensure all inmates have the opportunity to attend the law library.

b) How often do these inmates have access to the law library?

Once a week for two hours each visit.

c) How does access to the law library differ between General Library User (GLU) and Priority Library User (PLU) inmates?

PLU inmates are given higher priority based upon established court deadline dates.

2. Medical Appeals Process:

a) What is the process for answering medical and ADA appeals?

i) Who responds?

The First Level Review is prepared by Cynthia Gorospe, Staff Service Analyst, Health Care Appeals Coordinator. The Second Level of Review is prepared by Joe Kravitz, CC-II, Health Care Appeals Coordinator.

ii) Who interviews the inmate?

Appropriate medical staff

iii) Who prepares the response?

Health Care Appeals Coordinators prepare the responses, which are reviewed and approved by either the Primary Care Provider, Chief Medical Officer, or Health Care Manager.

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION OFFICE OF AUDITS AND COMPLIANCE

REPORT OF FINDINGS

ADMINISTRATIVE SEGREGATION BED UTILIZATION REVIEW

PELICAN BAY STATE PRISON

APRIL 15 THROUGH APRIL 25, 2008



CONDUCTED BY

CLASSIFICATION SERVICES

Pelican Bay State Prison

April 21-25, 2008

ADMINISTRATIVE SEGREGATION BED UTILIZATION REVIEW

The Pelican Bay State Prison Administrative Segregation Unit (ASU) Bed Utilization Review was conducted during the week of April 21 thru the 25, 2008 by L. M. Puig, Classification Staff Representative, Classification Services Unit, Adrienne Redding, Correctional Counselor II, Specialist, High Security and Transitional Housing, Dee Long, Correctional Counselor II, Specialist, High Security and Transitional Housing and Scott Fish, Correctional Counselor II, Specialist, High Security and Transitional Housing.

The intent of this review is to provide an evaluation of bed utilization in the ASU. This assessment is intended to be used as a management tool by the institution to assist in identifying areas that could reduce time spent in ASU and overcrowding in ASU.

Attached is a breakdown of types of cases by CDC numbers that were reviewed by the team.

SAMPLE IDENTIFICATION

A total of 54 cases were reviewed. Of these cases:

25 were placed in Administrative Segregation based on a pending Disciplinary charge.

21 were placed in Administrative Segregation based on a pending investigation of Safety concerns/needs.

8 were placed in Administrative Segregation based on a pending investigation of Prison Gang Status or update of previous validation.

Does the institution use a comprehensive ASU tracking method that records the reason for ASU placement, track time periods for specific processes and total amount of time in ASU? Yes

Comment: Although there is not a requirement that a system other than the Distributed Data Processing System (DDPS) be maintained, the DDPS capabilities are limited. A comprehensive ASU tracking system can identify a multitude of data fields, which can be customized by the needs of each specific institution. The tracking system can be very basic but still provide meaningful information that can significantly reduce workload. The system should be maintained in a format that can be sorted by specific areas to enable staff to easily identify possible problem areas at a quick glance.

GENERAL ASU CASE PROCESSING TIMES

Period from Initial Placement in ASU to CSR Review

California Code of Regulations (CCR) 3335(c) (1) requires that the Institution Classification Committee refer the case for Classification Staff Representative (CSR) review and approval when any case is retained in ASU for more than 30 days. When the initial ICC review determines that a case is not expected to be resolved within 30 days, referring the case to the CSR at the time of the initial hearing expedites this process and assures compliance with the regulation.

California Code of Regulations 3335(c) requires that inmates placed in ASU be seen by ICC within 10 days of placement.

Time from the date of placement in Administrative Segregation to the initial ICC referral for CSR Review ranged from 2 days to 12 days. Average time was 6.5 days

It is the expectation that cases referred for ASU retention be presented to the CSR for review within 30 days of the Classification committee referral.

Time from the initial ICC referral for CSR Review to the actual CSR review ranged from 5 days to 76 days. Average time was 29 days.

When an ASU case is reviewed by a Classification Staff Representative (CSR), the CSR will indicate a time period in which the case must be presented again to a CSR for further review.

Of the 54 cases reviewed, there are 9 cases currently retained in ASU beyond the CSR approved retention date. (The expectation is there should be 0 cases in this category)

There are 0 cases that have been in ASU over 30 days that do not have ASU extension approvals at all. (The expectation is there should be 0 cases in this category)

DISCIPLINARY CASES

Hearing Timelines

Once a Rules Violation Report (RVR) has been issued, simply determining the time between the issuance and the subsequent hearing does not provide an accurate measurement of the institution's efficiency in processing the case. This is due to the fact that the inmate may choose to postpone the hearing until after any District Attorney review/prosecution has occurred. Due to this factor, RVR processing must be categorized and examined separately.

RVR's heard without postponement

Administrative Segregation Bed Utilization Review (Self Certification)
Page 3

17 cases were examined.

Time from the date of the issuance of the RVR to the date the RVR was heard ranged from 4 days to 117 days. Average time was 34 days.

RVR's heard with postponement pending DA action

0 cases were examined.

Post-Hearing Processing Timelines

Following the completion of the hearing by the disciplinary hearing officer or committee, there are no due process timeframes to interfere with rapid completion of the remainder of the disciplinary process. The time is measured from the hearing date through the ICC review. There are several reviews that must occur during this period. Each review is measured.

0 RVR's were dismissed and 8 RVR's are still pending.

Hearing to Facility Captain Review:

Time from the date of the RVR hearing to the date the RVR was audited by the Facility Captain ranged from 1 day to 25 days. Average time was 6.5 days. (The Department has no regulatory time constraints; however, the expectation is this time will be within 5 working days.)

Facility Captain to Chief Disciplinary Officer Review:

Time from the date the RVR was audited by the Facility Captain to the date the RVR was audited by the Chief Disciplinary Officer ranged from 1 day to 34 days. Average time was 7 days. (The Department has no regulatory time constraints; however, the expectation is this time will be within 3 working days.)

Chief Disciplinary Officer to ICC review:

Time from date the CDO audited the RVR to the case being reviewed by the ICC for the RVR ranged from 6 days to 79 days. Average time was 23 days. (The expectation is the inmate will appear before ICC within 14 days. This will allow staff a two-week ICC rotation period.)

Incident Report Processing

Once an incident has occurred, the Incident Report must be prepared and completed. This timeline measures the process within the institution as it completes the report, forwards it to

Administrative Segregation Bed Utilization Review (Self Certification)
Page 4

its Investigative Services Unit (ISU) and the subsequent response time from the office of the District Attorney (DA) or the ISU screen-out based on local agreement with the DA.

Incident Date to ISU Receipt of Incident Report:

Date from incident occurrence to the date ISU received the Incident Report is within 24 hours. (The expectation is the complete package will be presented to ISU within 7 calendar days.)

ISU Receipt of Incident Report to Referral to DA/ISU Screenout:

Date from ISU receipt of Incident Report to referral to DA or ISU screen out ranged from 1 day to 176 days. Average time was 25 days. (The expectation is the time should not exceed 5 working days.)

DA Referral to Resolution:

Date from DA referral to either rejection or acceptance of the case ranged from 2 days to 97 days. (This is one area that the institution has no definitive control over, however, it is suggested that the institution work closely with the DA's office to track the decision making process to resolution of either acceptance of the case for prosecution or rejection of the case for prosecution).

SAFETY CONCERNS

When an inmate is placed into ASU based on safety concerns, which must be investigated, there are no due process time constraints for the resolution and completion of the investigation. The amount of time taken to complete this type of investigation varies and generally reflects the amount of resources utilized to conduct the investigation.

There were 21 cases reviewed that were placed in Administrative Segregation based on the need for investigation of safety concerns.

Investigation initiation to Completion:

Time from the date of referral to staff for investigation to the date the investigation was concluded ranged from 15 days to 76 days. Average time was 32 days. (The expectation is this time should not exceed 30 calendar days)

Investigation Completion to ICC Review:

Administrative Segregation Bed Utilization Review (Self Certification) Page 5

Time from conclusion of the investigation to ICC review of investigation results ranged from 1 days to 71 days. Average time was 15 days. (The expectation is that the inmate will appear before ICC within 14 calendar days. This will allow staff a 2-week rotation period).

GANG INVESTIGATION/VALIDITION/DEBRIEFING

When an inmate is placed into ASU based on the need for investigation of gang activity, there are no due process time constraints, which delay the resolution and completion of the investigation. This timeline measures the amount of time taken to complete this type of investigation, the review by the Law Enforcement Liaison Unit (LEIU) and the time to review and conclude the issue by ICC and CSR.

There were 8 cases reviewed that were placed in Administrative Segregation based on Gang Investigation/Validation/Debriefing.

ASU Placement to Referral to IGI for Investigation:

Days from ASU placement to IGI investigation assignment being received by IGI ranged from 1 day to 132 days. Average time was 33 days.

Initiation of IGI investigation to Conclusion of Investigation:

Days from IGI investigation assignment to receipt of completed investigation ranged from 29 days to 125 days. Average time was 58 days.

NUMBER OF INMATES IN ASU ENDORSED & AWAITING TRANSFER

Documentation presented by Records staff indicates that there are 12 cases that are currently endorsed and awaiting transfer that are housed in ASU. These cases have been endorsed for transfer from 12 to 260 of days. The endorsed cases are SNY cases.

GENERAL OBSERVATIONS:

The reviewing team would like to thank the C&PR and Records Staff for their corporation in providing the necessary files for our review. Also, the staff wishes to thank the Administration for providing refreshments for the reviewing trams.

DISCIPLINARY

CDC#	Days From 114D to Initial CSR Referral	Days From Initial ICC Referral To CSR Review	Expiration Date Of Current CSR ASU Extension	If ASU Extension Has Expired, By how Many Days?	Date of RVR	Charge	Postponed Pending DA	Days From RVR to	Days from Hearing to Captains Review	Days from Captain's Review to CDO Review	Days from CDO Review to ICC Review	Days from RVR to BPT Desk	Days from BPT Desk To BPT for Offer	Days to BPT Offer or Hearing	Days from Incident to ISU Receiving 837	ISU Receipt to DA Screnout or Referral	DA Accept	Accepted/	Total Days since Initial ASU Placement	Comments	TODAY'S DATE
CDC#	Kelellal	Keview	LATERISION	Wally Days:	Date of KVK	Participatio	renaing DA	ricaring	Keview	IXEVIEW	Keview	BFT Desk	Onei	or riearing	037	Referral	renaing	Rejected	riacement	Comments	DAIL
K34229	7	20	7/3/08	0	12/21/07	n in a Riot	N/A	Pending	Pending	Pending	Pending	N/A	N/A	N/A	N/A	N/A	N/A	N/A	103	Pending the adjudication of the RVR.	4/22/2008
	_			_		Possession of a	.,									_					
P81243	6	59	4/17/08	5	10/2/07	Weapon	Yes	117	11	1	14	N/A	N/A	N/A	UNK	9	63	3 Accepted	201	PBSP-SHU endorsed on 4/17/08.	4/22/2008
K95528	9	20	5/13/08	0	11/5/07	Battery on Staff w/SBI Possession	Yes	Pending	Pending	Pending	Pending	N/A	N/A	N/A	UNK	45	84	Accepted	169	Pending the adjudication of the RVR.	4/22/2008
J09302	6	14	5/4/08	0	10/18/07	of a Weapon	No	42	5	1	8	N/A	N/A	N/A	UNK	176		Rejected	187	PBSP-SHU endorsed on 1/10/08.	4/22/2008
	-					Participatio															
V09815	8	21	6/24/08	0	2/8/08	n in a Riot	N/A	Pending	Pending	Pending	Pending	N/A	N/A	N/A	UNK	N/A	N/A	N/A	91	Pending the adjudication of the RVR.	4/22/2008
P00802	8	22	4/16/08	6	1/22/08	Participatio n in a Riot	N/A	31	7	5	14	N/A	N/A	N/A	UNK	N/A	N/A	N/A	112	Endorsed for transfer to an alternate prison	. 4/22/2008
F67500	12	21	4/25/08	0	2/8/08	Participatio n in a Riot	N/A	Pending	Pending	Pending	Pending	N/A	N/A	N/A	N/A	N/A	N/A	N/A	95	Pending the adjudication of the RVR.	4/22/2008
F52346	2	20	8/14/08	0	1/14/08	Possession of a Weapon	N/A	38	13	1	27	N/A	N/A	N/A	N/A	2	97	Pending	99	Pending DA Referral/Response. Pending adjuducation of the RVR.	4/22/2008
V38883	7	29	7/31/08	0	12/26/07	Attempted Murder	No	63	2	3	9	N/A	N/A	N/A	N/A	36	13	Rejected	181	PBSP-SHU endorsed on 4/2/08	4/22/2008
J63555	7	41	6/7/08	0	8/29/07	Battery on an Inmate w/SBI	No	37	25	7	79	N/A	N/A	N/A	N/A	42	22	Rejected	237	PBSP-SHU endorsed on 2/21/08.	4/22/2008
P97399	8	42	4/8/08	14	1/1/08	Battery on Staff	Yes			Pending	Pending	N/A	N/A	N/A	N/A	24	Pending		112	Pending DA Referral/Response. Pending adjuducation of the RVR.	4/22/2008
T51592	8	28	4/27/08	0	2/19/08	Participatio n in a Riot	N/A	28	8	5	Pending	N/A	N/A	N/A	N/A	N/A	N/A	N/A	61	Pending the adjudication of the RVR.	4/22/2008
T74967	8	33	9/18/08	0	5/14/07	Attempted Murder	Yes	38	7	4	Pending	N/A	N/A	N/A	N/A	N/A	Pending	Pending	342	Pending DA Referral/Response.	4/22/2008
T08655	3	36	7/10/08	0	12/2/08	Attempted Murder	No	41	2	16	6	N/A	N/A	N/A	N/A	N/A	Pending	Pending	142	PBSP-SHU-endorsed on 3/12/08	4/22/2008
K47260	7	12	7/2/08	0	11/21/07	Battery on an Inmate	Voo	20	4	3	20	N/A	N/A	N/A	NI/A	2	7	Poisstad	150	DDSD SHILl ondercod on 2/4/02	4/22/2006
K47268	1	13	1/2/08	0	11/21/07	w/Weapon Battery on an Inmate	Yes	29	4	3	20	IN/A	IN/A	IN/A	N/A	2	/	Rejected	153	PBSP-SHU endorsed on 3/4/08.	4/22/2008
H49071	9	10	7/2/08	0	11/19/07	w/Weapon Possession	Yes	28	7	22	21	N/A	N/A	N/A	N/A	1	7	Rejected	155	PBSP-SHU endorsed on 1/16/08.	4/22/2008
P94626	5	22	7/4/08	0	1/11/08	of a Weapon	No	11	6	3	20	N/A	N/A	N/A	N/A	2	46	Rejected	102	PBSP-SHU endorsed on 3/6/08.	4/22/2008

DISCIPLINARY

CDC#	Days From 114D to Initial CSR Referral	Days From Initial ICC Referral To CSR Review	Expiration Date Of Current CSR ASU Extension	If ASU Extension Has Expired, By how Many Days?	Date of RVR	Charge	Postponed Pending DA	Days From RVR to Hearing		Days from Captain's Review to CDO Review	CDO	Days from RVR to BPT Desk	Days from BPT Desk To BPT for Offer	Days to BPT Offer or Hearing	ISU Receiving	ISU Receipt to DA Screnout or Referral	DA Accept/	Accepted/ Rejected	Total Days since Initial ASU Placement	Comments	TODAY'S DATE
1/00070	7	200	4/00/00	0	4/00/00	Battery on	NI/A	40			00	NI/A	NI/A	NI/A	NI/A	N/A	NI/A	NI/A	40	SHU Term assessed and Suspended and	4/00/0000
K96672 P34172	3	36	4/23/08 2/3/09	0	1/23/08 8/17/06	an Inmate Battery on an Inmate w/Weapon	N/A No	18	1	34	26 35	N/A N/A	N/A N/A	N/A N/A	N/A N/A	N/A 2	N/A 2	N/A Rejected	49 618	released to the GP on 3/12/08. PBSP-SHU endorsed. Validated on 4/16/07 as a Gang Member.	4/22/2008
						Possession of a												,			
T51076	9	43	7/25/08	0	2/4/08	Weapon Possession of a	No	11	6	8	27	N/A	N/A	N/A	N/A	10	5	Rejected	77	PBSP-SHU endorsed on 3/27/08.	4/22/2008
K01576	8	28	5/29/08	0	11/13/07	Weapon	No	21	3	1	19	N/A	N/A	N/A	N/A	3	5	Rejected	161	PBSP-SHU endorsed on 1/31/08.	4/22/2008
K56478	8	29	4/24/08	0	2/1/08	Participatio n in a Riot		Pending	Pending	Pending	Pending	N/A	N/A	N/A	N/A	N/A	N/A	N/A	112	Pending the adjudication of the RVR.	4/22/2008
F16412	8	22	5/15/08	0	12/31/07	Possession of a Weapon		Pending	Pending	Pending	Pending	N/A	N/A	N/A	N/A	UNK	UNK	UNK	112	Pending DA Referral/Response. Pending adjuducation of the RVR.	4/22/2008
C25226	7	28	5/9/08	0	10/24/07	Battery on Staff	No	39	4	1	Pending	N/A	N/A	N/A	N/A	1	22	Accepted	181	Pending DA Referral/Response. Pending adjuducation of the RVR.	4/22/2008
F14613	8	22	4/25/08	0	1/24/08	Participatio n in a Riot	N/A	Pending	Pending	Pending	Pending	N/A	N/A	N/A	N/A	N/A	N/A	N/A	112	Pending the adjudication of the RVR.	4/22/2008

SAFETY

CDC#	DAYS FROM 114D to INITIAL CSR REFERRAL	DAYS FROM INITIAL ICC REFERRAL TO CSR REVIEW	Expiration date of current CSR ASU Extension	How many days since ASU extension expired	Date of Referral to Staff for Investigation	Days to Completion of Investigation	Conclusion of Investigation to ICC Review	ICC referral to CSR After conclusion of Investigation	Days in ASU to date	Comments	Today's Date
										Pending completion of the	
G-01688	6	22	6/3/08	0	3/5/08	Pending	Pending	Pending	54	investigation.	4/22/2008
										Pending completion of the	
F-13942	7	28	4/1/08	21	1/2/08	Pending	Pending	Pending	118	investigation.	4/22/2008
P-31528	7	29	5/8/08	0	1/10/08	1	1	1	139	SATF-IV SNY endorsed on 1/10/08.	4/22/2008
P-14547	6	29	7/4/08	0	12/26/07	1	47	1	124	SVSP-IV SNY endorsed on 3/6/08.	4/22/2008
H-85147	3	28	5/18/08	0	1/13/08	15	14	Pending	69	Pending completion of the investigation.	4/22/2008
H-63510	6	20	4/27/08	0	2/27/08	18	10	1	59	SVSP-IV SNY endorsed on 4/10/08	4/22/2008
P-67901	9	29	7/4/08	0	12/10/07	1	71	1	134	SVSP-IV SNY endorsed on 3/6/08.	4/22/2008
F-61074	2	41	6/17/08	0	3/5/08	Pending	Pending	Pending	51	Pending completion of the investigation.	4/22/2008
K-44812	3	20	6/24/08	0	1/16/08	77	Pending	Pending	100	Pending completion of the investigation.	4/22/2008
E-84710	6	15	7/4/08	0	10/18/07	111	1	1	187	SVSP-IV SNY endorsed on 3/6/08.	4/22/2008
										Pending completion of the	
H-58195	7	22	4/9/08	13	11/28/08	Pending	Pending	Pending	153	investigation.	4/22/2008
V-17463	5	48	3/26/08	28	1/23/08	58	1	1	96	Pending review by a CSR.	4/23/2008
H-37761	8	76	7/10/08	0	12/11/07	1	1	76	134	SATF-IV SNY endorsed on 3/12/08.	4/23/2008
D-16764	8	29	7/10/08	0	7/18/07	184	19	1	288	SVSP-IV SNY endorsed on 3/12/08.	4/23/2008
	_			-	-1					Pending completion of the	1/00/2222
E-63886	7	48	4/20/08	3	2/6/08	Pending	Pending	Pending	84	investigation.	4/23/2008
D-55689	7	34	6/4/08	0	10/23/07	1	2	2	183	RJD-IV SNY endorsed on 2/5/08.	4/23/2008
J-54072	7	27	5/7/08	0	12/5/07	2	2	2	140	SATF-II SNY endorsed on 1/8/08	4/23/2008
V-30671	9	27	6/17/08	0	3/10/08	Pending	Pending	Pending	44	Pending completion of the investigation.	4/23/2008

SAFETY

CDC#	DAYS FROM 114D to INITIAL CSR REFERRAL	DAYS FROM INITIAL ICC REFERRAL TO CSR REVIEW	Expiration date of current CSR ASU Extension	How many days since ASU extension expired	Date of Referral to Staff for Investigation	Completion of	Conclusion of Investigation to ICC Review	ICC referral to CSR After conclusion of Investigation		Comments	Today's Date
										HDSP-IV endorsed on 8/7/07 and on 12/19/07, MCSP-IV SNY	
K-77330	6	35	7/25/08	0	5/2/07	36	2	1	402	endorsed on 3/27/08.	4/23/2008
F-99912	5	35	8/15/08	0	2/29/07	1	33	1	61	HDSP-IV endorsed on 8/7/07 and HDSP-IV SNY endorsed on 4/17/08.	4/23/2008
J-68558	7	21	7/4/08	0	12/2/07	9	2	1	143	SATF-IV SNY endorsed on 3/6/08.	4/23/2008

GANG

	DAYS FROM Expiration		Expiration	If ASU	Days from ASU Placement To		Days from Completion of	Dave from referrel			
000 #			date of current CSR ASU	expired, how	Investigation Assignment being	Days to Completion		Days from referral to LEIU to Receipt	Days in ASU		Today's
CDC #	CSR REFERRAL	CSR REVIEW	Extension	many days	Received by IGI/Staff	of Investigation	Validation	of 128B-2	to date	Comments Referred to CSR on 3/26/08 for	Date
P-52189	5	5	8/14/2008	0	2	125	UNK	63	249	PBSP/COR-SHU.	4/22/2008
E-85412	5	26	7/10/2008	0	5	57	1	Pending	508	Pending CDC-128-B-2 from OCS.	4/22/2008
J-76501	7	43	9/15/2008	0	1	Pending	Pending	Pending	97	Pending Investigation by IGI.	4/22/2008
H-35300	5	41	8/11/2008	0	1	Pending	Pending	Pending	250	Pending Investigation by IGI.	4/23/2008
H-41080	4	21	4/17/2008	6	1	45	110	Pending	299	Pending Investigation by IGI.	4/23/2008
K-51763	5	43	6/23/2008	0	132	35	22	Pending	278	Pending Investigation by IGI.	4/23/2008
F-79321	6	13	4/9/2008	14	10	Pending	Pending	Pending	124	Pending Investigation by IGI.	4/23/2008
T-43507	6	28	5/1/2008	0	1	29	1	45	118	Pending Investigation by IGI.	4/23/2008

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION OFFICE OF AUDITS AND COMPLIANCE

REPORT OF FINDINGS

RADIO COMMUNICATIONS

PELICAN BAY STATE PRISON APRIL 15 THROUGH APRIL 25, 2008



CONDUCTED BY

TELECOMMUNICATIONS

Review of Radio Communications

PELICAN BAY STATE PRISON

Introduction

This review of Radio Communication Operations at Pelican Bay State Prison, (PBP) was conducted by the Compliance/Peer Review Branch (CPRB), Office of Reviews and Compliance and the Radio Communications Unit (RCU), between the dates of April 21 through 24, 2008. The review team utilized the California Penal Code (PC), California Code of Regulations (CCR), Title 15, California Department of Corrections and Rehabilitation (CDCR) Department Operations Manual (DOM), State Administrative Manual (SAM), Federal Communication Commission (FCC) regulations and Administrative Bulletin (AB) 90/35 as the primary sources of operational standards.

This review was conducted by Chris Kinman, Correctional Officer, of the Facilities Planning and Management Division, Telecommunications Section, Radio Communications Unit.

The review consisted of an on-site inspection, interviews with staff, reviews of procedures, and observation of institutional operations.

The purpose of the CPRB review is one of overall analysis and evaluation of the Institution's compliance with the terms and conditions of State regulations as applied to Public Safety Communications. Each area was reviewed with staff and any problems were reviewed or solved with the PBP Radio Liaison. Overall, findings presented in the attached report represent the consensus.

Review of Radio Communications

Pelican Bay State Prison, Crescent City

REVIEW SCOPE AND METHODOLOGY

The CPRB and the RCU conducted an on-site review at PBP during the period of April 21 through 24, 2008. The purpose of this review was to assess the level of compliance with established State regulations in the areas of Public Safety Communications. This review and the attached findings represent the formal review of PBP's compliance by CPRB.

The scope and methodology of this review was based upon written review procedures developed by the CPRB and provided to PBP's staff in advance of the review.

A random sample of radios were reviewed, checking the Radio as to the Post Assignment, the Department of General Services (DGS) 'S' number and the radio serial number. Utilizing the inventory, matrix and AB 90/35 to provide the proper radio location, PBP was at 100% on radio placement. The only discrepancy found during the review was an unauthorized, unlicensed radio's in use by Inmate Ward Labor (IWL). The radios have been removed from service and the radio liaison is working with IWL and the RCU on the need for radios.

Recommendations are to continue normal practices as PBP has no issues with usage of the 800 MHz Trunked Radio System and all PBP staff are following all required Public Safety Standards.

The Reviewer would also like to complement the Radio Liaison at PBP (Sergeant D. Findlay) as his organizational skills and overall help made this review a success.

Radio Communication Compliance Review Pelican Bay State Prison (PBP) Exit Conference Discussion Notes April 21st - 24st, 2008

The Office of Audits and Compliance (OAC) and the Radio Communication Unit (RCU) conducted a Radio Communications Security Compliance Review of PBP the week of April 21st, 2008. The review covered 28 different areas which PBP was fully compliant in 26 areas, and non compliant in 1 area. The chart below details these outcomes. Other observations are noted below.

FINDINGS SUMMARY:

	Compliant	Partial Compliance	Non Compliant
1 Radio Liaison Identified?	Ċ	·	
2 Inventory System in Place?	С		
3 All Radios Accounted for?	С		
4 Radio Matrix in place?	С		
5 Repair Procedure?	С		
6 Repair Tracking?	С		
7 Battery Management in Place?	С		
8 Proper usage of Battery Management?	С		
9 Inmate Access to Radios?	С		
10 Radio Vault Secured?	С		
11 Intrusion Alarm on Radio Vault?		PC	
12 Authorization to Enter Vault?	С		
13 Key to Vault Secured?	С		
14 Vault key Access for DGS-TD Tech?	С		
15 System Watch/SIDR Operational & Computer Secured?	С		
16 Procedure to Operate System Watch/SIDR?	С		
17 Staff to Operate System Watch/SIDR identified?	С		
18 System Watch/SIDR Training?	С		
19 Chit System in Place for Radios?	С		
20 Other Radios on Grounds?			NC
21 Scanners on Grounds?	С		
22 Who do you contact for System Malfunction?	С		
23 Steps taken when System Fails?	С		
24 Staff have Knowledge on Radio Fail-Soft?	С		
25 Staff have Knowledge of RCU Staff?	С		
26 Off Grounds Communication / Fire Department.	С		
27 Working CLERS System?	N/A		
28 Working CMARS System?	С		
Total	26		1

The Radio Vault is checked by the Outside Patrol Sergeant during his tour of duty and logged on his check sheet.

The IWL area was found to have unauthorized radios in use on state grounds.

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION OFFICE OF AUDITS AND COMPLIANCE

REPORT OF FINDINGS

CASE RECORDS

PELICAN BAY STATE PRISON APRIL 15 THROUGH APRIL 25, 2008



CONDUCTED BY

CASE RECORDS ADMIN

Correctional Case Records Services lead a three member team comprised of Kathy Moore, Correctional Case Records Administrator, Marti Eichman, Correctional Case Records Manager, Central California Women's Facility, Rose Lucchesi, Correctional Case Records Supervisor, California Correctional Center to conduct a compliance review April 21 - 25, 2008, of specific areas within the Pelican Bay State Prison Records Office.

Administrative staff and the Correctional Case Records Manager were aware of this review in advance and all staff was cooperative and assisted with providing information to the review team when requested.

The two primary areas reviewed were:

- 1. Holds, Warrants and Detainers (HWD)
- 2. Warden's Checkout Order (CDC 161)

An overview of the findings in the review process is outlined in this document.

This review consisted of 35 Central Files of recently paroled inmates and 16 additional Central Files for HWD purposes for a total of 51 Central Files reviewed.

HOLDS, WARRANTS AND DETAINERS (HWD)

Reference: DOM Section 72040.5 & 72040.5.1 & 72040.5.3 & 72040.6.2 & 72040.7 & CR 97/04 & CR 01/18 & CR 99/23

"The HWD system ensures that information regarding any specific or potential detainer is recorded and called to staff attention within four hours of receipt to determine what effect, if any, the hold might have on an inmate's custody."

"The HWD Coordinator shall prepare letters of inquiry or initiate teletype requests to resolve potential holds based on the CDC Form 850s completed by institution staff and complete necessary follow-ups on any communication received from law enforcement agencies. The CDC Form 850 shall be attached to the top of the detainer section of the Central File and all such actions shall be entered in the HWD log."

"The HWD Coordinator's initial request to obtain information shall be completed within two working days and follow-up at the 60-day and 10-day audits prior to release. Telephonic follow-up should be used at the 10-day audit."

"If a detainer exists or is believed to exist on an inmate, the HWD coordinator shall prepare a CDC Form 850 documenting the pertinent facts, and immediately contacting the designated staff person responsible for evaluating the potential detainer..."

"Release Prior to Parole. It is imperative that when an inmate is released prior to their parole date, pursuant to Penal Code Section 4755, that a CDC Form 801, Detainer, accompanies the inmate to ensure that he/she remains in custody until his/her actual parole date."

Desk Procedures for the HWD clerical staff were reviewed. Clerical staff were interviewed and state they refer to their desk procedures frequently. They explained verbally the processes they are familiar with and when necessary they review procedures for those processes they are still learning. In reviewing the desk procedures it was noted that staff are not utilizing the most current forms for the Extradition Process. Desk Procedures need to be updated utilizing the new Extradition Manual.

In interviewing staff relative to their procedures there are a couple of areas which additional training is needed:

- Releasing an inmate with multiple detainer's according to CDCR policy, they were unaware of the proper procedure as outlined in DOM 72040.7 and CR 97/04. The references noted are in the desk procedures
- When an agency placing a hold refuses to pick-up the inmate or drops the hold, the information is documented on the CDC Form 850 and a followup teletype is sent to that agency prior to release. The staff were not aware of this policy or procedure as outlined in CR 97/04. The references are in the desk procedures.

Of the 16 cases reviewed there were two cases, where the CDC Form 850 did not reflect the date the warrant was received or the time it was entered into the Offender Based Information System (OBIS).

T06422 Shakir F95114 Heffner

Of the 16 Central Files reviewed, 1 case received from NKSP-RC had two CDC Form 850's in file for Potential Outstanding Warrants where a letter of inquiry was not completed/or a follow-up done at intake when received at PBSP.

V28982 Vasquez

Of the 16 files reviewed, there were three case's where there is no indication to reflect the inmate's were notified via CDC Form 661, Notice of Detainer, of a warrant being placed or the opportunity to request the appropriate disposition.

F95114 Heffner B26484 Griffin P67159 Solis

Of the 16 files reviewed, there were four cases where there wasn't any evidence in the File that the CDC Form 661 had been returned from the inmate acknowledging receipt of CDC Form 661. However, in the desk procedures it indicates that the return of the signed CDC Form 661 is tracked to insure the signed CDC Form 661 is returned from the inmate via the Correctional Counselor I. It appears this procedure is not being followed. Based on this discrepancy, it is unclear at what point the sending agency is notified of the inmate's receipt of the warrant by them.

F69982 Skinner F98240 Wilson V28982 Vasquez V39920 Gutierrez

Of the 16 files reviewed, there were two files where the improper box was checked on the CDC Form 661 as to the appropriate disposition the inmate was entitled to. See below for specifics:

T06422 Shakir The CDC Form 661 had the checkbox marked 'None applicable', however it should have been checked as Penal Code (PC) Section 1389 applicable.

T37784 Chaffin The CDC Form 661 had the checkbox marked 'PC Section 1381', however it should have been checked as PC Section 1203.2a applicable.

Of the 16 files reviewed, there was one case which had an expired timeserver term that had not been deleted from OBIS.

F95114 Heffner This inmate had a timeserver term that was to expire on 3/12/2008. In reviewing the tickler file that is utilized, there was no card for this 'S' and the timeserver information had not been deleted from OBIS.

WARDEN'S CHECKOUT ORDER (CDC 161)

Reference: DOM Section 74070.3

"...Paperwork and routine dress-out procedures on cases with release date on weekends or holidays shall be completed prior to the weekend or holiday."

"Prior to release of the inmate, records office staff shall prepare the CDC Form 161, Warden's Checkout Order, and arrange distribution as required by institution operations."

Reference: DOM Section 74070.21

"The following data shall be typed on the CDC Form 161:

- Date of Release
- Type of Release
- CDC number
- Commitment name
- Controlling Discharge Date
- Name of parole unit and county of residence
- Parole Region
- Check off section to indicate that PC Sections 3058.6 and 3058.8 notifications have been sent.

"The CDC Form 161 shall be typed by clerical staff. As part of the prerelease audit, the release of information on the form shall be verified at a level not less than that of a Case Records Analyst as the form is used by the institution as the source document for OBIS input and therefore, its accuracy determines the accuracy of parole information in OBIS".

Reference: Instructional Memorandum (CR 01/14)

- "...The CDC Form 161, Warden's Check-out Order, shall indicate that a notice was sent pursuant to the applicable notification requirement..."
- "...the Warden's Checkout Order must include a notation above the Case Records staff's signature block which states PC 3058.6 and/or PC 3058.8 has been complied with or that PC 3058.6 and/or PC 3058.8 is not applicable."

Desk Procedures for the Parole desk clerical staff were reviewed. Clerical staff were interviewed and state they refer to their desk procedures frequently. They explained verbally the processes they are familiar with and when necessary they review procedures for those processes they are still learning.

Files were reviewed for inmates/parolees who were released from Pelican Bay State Prison during the preceding three weeks of the review.

There were 35 cases reviewed and the findings are as follows:

The Warden's Checkout Orders are to include a check in the boxes for the notices pursuant to PC 3058.6, PC 3058.8, etc., or N/A if not applicable. This procedure is not being followed. Of the 35 cases reviewed none reflected N/A when not applicable.

In two of the cases reviewed the Sosa Credits were not reflected on the Warden's Checkout Order, CDC Form 161, subsequently the Controlling Discharge Date (CDD) reflected on the Warden's Checkout Order is inaccurate. See below as it pertains to each inmate case reviewed.

T71464 Bridges 374 days of Sosa Credit was not reflected on the Warden's Checkout Order, therefore the CDD on the Warden's Checkout Order is inaccurate. The CDD posting on the Chronological History (CDC Form 112) is also not accurate. The Warden's Checkout Order was signed off on 4/15/08, reflecting the CDD as 4/21/2011, however should it have been 4/12/2010. The Warden's Checkout Order is the source document for entry into OBIS, therefore the discrepancies noted will also be entered into OBIS incorrectly.

F54326 Cooper 63 Days Sosa Credit was not reflected on the Warden's Checkout Order, therefore the CDD on the Warden's Checkout Order is inaccurate. The CDD posting on the CDC Form 112 is also not accurate. The Warden's Checkout Order was signed off on 4/03/08, reflecting the CDD as 4/12/2011, however should have been 2/8/2011. The Warden's Checkout Order is the source document for entry into OBIS, therefore the discrepancies noted will also be entered into OBIS incorrectly.

In one case it was found that the Warden's Checkout Order that is placed on the Parole Clipboard and the one that is placed in the Field Folder did not reflect the same information. The document on the Parole Clipboard did not reflect the inmate was entitled to 44 days Kemper Credit, however, the document in the Field Folder reflected this information and the data was entered correctly into OBIS. In discussion with the staff responsible for this area, they explained the process they use for distribution of the Warden's Checkout Order after it has been signed off. It was brought to their attention of the inconsistency between these documents.

F81694 Bobadilla

In one case it was found that the Warden's Checkout Order did not reflect the Type of Release box marked. It should have been marked as parole.

T16927 Gallagher

General Findings

In the Holds, Warrants and Detainer portion of the audit, 19 components were reviewed. There were six areas listed below that need to be brought into compliance with the current policies and procedures as indicated in the above review portion of this report:

- Documentation on the CDC Form 850 of the date and time the warrant is received and the date and time entered into OBIS pursuant to Departmental Policies and Procedures need to be adhered to.
- Letters of inquiry are not always being generated to resolve potential holds based on the CDC Form 850's completed by institution staff and/or complete any necessary follow-ups.
- The CDC Form 661 is not always being forwarded to inmates pursuant to Departmental policies and procedures.
- Staff are not following desk procedures for tracking the return of the CDC Form 661 from inmate acknowledging receipt of warrants and giving him the appropriate disposition option pursuant to Departmental Policy And Procedure. As well as notifying the issuing agency.
- Desk procedures are not being followed for tracking timeserver warrants.
- Follow Departmental Policy and Procedure for the appropriate application of disposition on the CDC Form 661.

Recommendations:

- On the job training should be provided and documented for the Correctional Case Records Analyst, Correctional Case Records Supervisor, Office Services Supervisor, clerical staff to ensure appropriate OBIS entries and information is recorded accurately on the CDC-161 Warden's Checkout Order.
- Ensure desk procedures are current and consistent and being followed.
- Provide training for the appropriate staff who are responsible for sending out the Letter's of Inquiry and ensure this process is reflected in the desk procedure.
- Ensure compliance with Departmental procedures and DOM Sections 72040.5, 72040.5.1, 72040.5.3, and CR 97/04.

General Findings

In the Warden's Checkout Order portion of the audit, 3 components were reviewed. There are two areas listed below that need to be brought into compliance with the current policies and procedures as indicated in the above review portion of this report:

- The Notices Sent Pursuant to PC 3058.6, PC 3058.8, etc., on the Warden's Checkout Order need to include N/A, not applicable for those that do not apply.
- Information on the Warden's Checkout Order is not being verified for accuracy prior to sign off. The release dates, i.e., Controlling Discharge Date (CDD), needs to be verified for accuracy prior to signing off the Warden's Checkout Order.

Recommendations

- On the job training should be provided and documented for the Correctional Case Records Analyst, Correctional Case Records Supervisor, Office Services Supervisor I, clerical staff and to ensure compliance with Departmental policy and procedure.
- Review the Warden's Checkout Order to ensure all appropriate information is reflected in compliance with Departmental policy and procedure (CR 99/69)

STAFF VACANCIES

No reported vacancies.

EXTENDED SICK LEAVE

None noted.